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MEDICAL BRIEF

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(See Ad. Page 21.)

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"439 MONTAGUE ST., BROOKLYN, Dec. 11, 1884.

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ARTHUR MATHEWSON, M. D.,

"Surgeon Brooklyn Eye and Ear Hospital."

"123 E. TWENTY-FIFTH STREET, Dec. 10, 1884.

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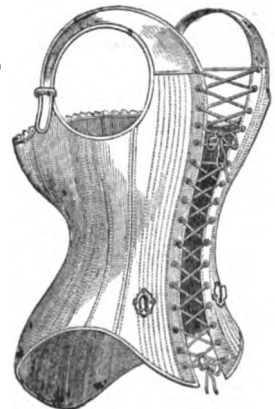


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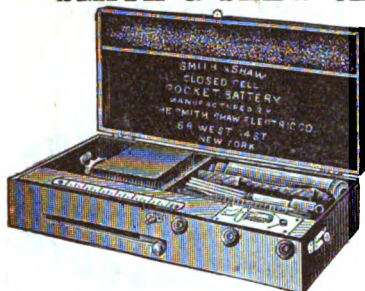
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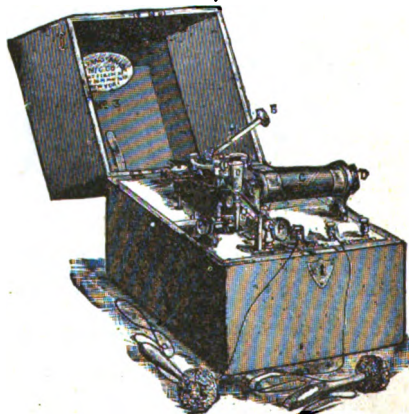
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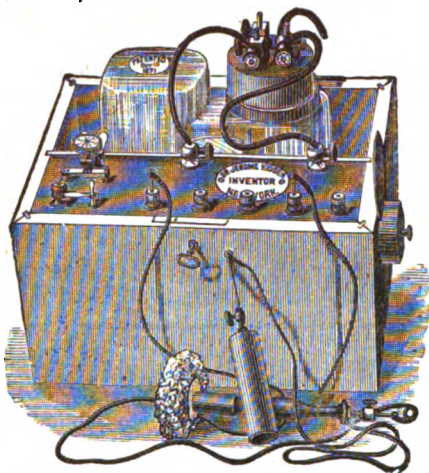
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For carefully making this, have 12 clear and uniform 2 oz. vials filled with distilled water, and two drops of Iodine Solution prepared from 2 grams Iodine, 4 grams Iodide of Potassium and 250 grams water, a good thermometer and starch mucilage. To prepare the mucilage, 10 grams starch are stirred with 80 grams water and poured into 125 or 150 grams boiling water. The thermometer is then introduced and the temperature allowed to cool to 100° F. and maintained so by the water bath. Ten grams extract of malt dissolved in 10cc. water are then stirred into the mucilage, the time being accurately noted. After one minute a good extract will have converted the thick mucilage into a thin liquid. As soon as this change has taken place it is necessary to examine the progress of the conversion of starch into soluble starch, dextrin and sugar at the end of every minute, by the following method:

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For convenient methods for the estimation of solid matter and water, dextrin, sugar, etc. and determination of albuminates and free acid, refer to American Journal of Pharmacy, Vol. 55, No. 6.

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Cup (or Ring), Adjustable Stem and Silver Spring. 6.50 "..... 5.00 "

Instruments sent by mail at my risk, on receipt of price; or I will send by express C. O. D. and collect return express on the money. Remittances may be made by mail, registered letter, money order, draft, or express, whichever is the most convenient. Give full name, post-office, county and state. Send for circulars. For further information in regard to the instrument, address

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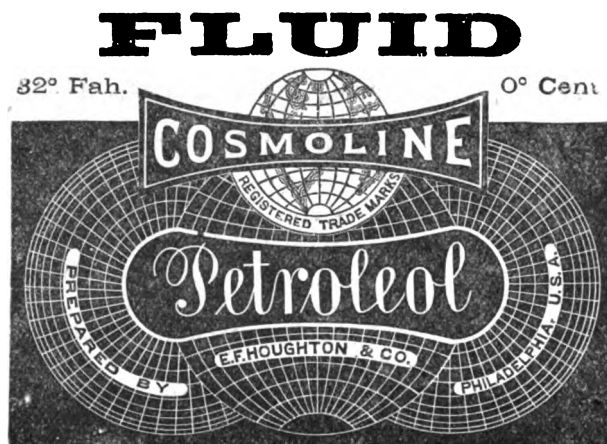
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THE MEDICAL BRIEF,

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VOL. XIII.

ST. LOUIS, JUNE, 1885.

No. 6.

[For the Brief.]

Introduction of Foreign Substances into the Body.

EDITOR MEDICAL BRIEF:—About three weeks ago, Dr. S., of this city, was called to see little Henry R. He found him suffering from retention of the urine and considerable swelling of the glans penis. The usual remedies were resorted to but with no effect and the urine was finally drawn off with the catheter which only gave temporary relief. The little fellow gradually grew worse and after a few days Dr. W. was called in consultation, the catheter was again introduced, but with only temporary relief. As the swelling of the glans was considerable and the foreskin drawn down tightly over them, it was thought best to divide the foreskin, which was performed in the usual manner. I will here state that the little patient was just three years old on the day the operation was performed. Upon the division of the foreskin Dr. W. observed something protruding from the meatus, which, after some little difficulty was removed, as it seemed to be imbedded just within the orifice and

coated with pus. The foreign body proved to be a small stone (such as are found in this vicinity in large quantities) about three-eighths of an inch long and about two-eighths of an inch in diameter at its largest end and tapering to a blunt point and somewhat rough in outline. Now, what seems to be somewhat remarkable is, that the presence of the stone in the urethra was not discovered upon the introduction of the catheter, and more than that both the physicians contend that the stone was a renal calculus, that it formed in the kidney, passed down the ureter into the bladder, then onward in its course until it lodged within the meatus.

I have not written this article as a criticism of the physicians' practice in this case, but I do not agree with them in regard to the origin of the stone. I am thoroughly satisfied that the child itself, or some of its playmates, introduced the stone into the urethra, that after being there a while it produced inflammation which caused the swelling of the glans and tightness of the foreskin (phymosis). I have known the child almost from

its birth, and he is a stout, healthy, rosy-cheeked boy, never had any serious sickness, no colic, and nothing to indicate any renal trouble in any way. His father also informs me that the foreskin was never drawn over the glans until this trouble had occurred. He also informed me that last fall the little fellow introduced several pods of dog fennel flowers up his nostrils and that one of the pods remained in the nostril several days before it was discharged, all of which, I think, goes to show that the little fellow has been in the habit of introducing foreign substances into the various openings of his body. It is a fact that children are frequently addicted to such practices.

Several years ago, a little boy, between three and four years of age, living in southern Ohio, introduced a pine stick about one and a half inches long and three-eighths of an inch in diameter into his urethra, and in order to remove it the physician in attendance had to make an incision through the walls of the penis.

In Holmes' Surgery, volume I., pages 824-5, are given several interesting cases where foreign bodies have entered the bladder through the urethra, the first of which is that of a sailor who was admitted to Guy's Hospital in 1829. A portion of a bougie was removed from the bladder by the operation of lithotomy. Two other cases of the same character are also given.

"In the Museum of Guy's Hospital there is the section of a large calculus, the nucleus of which consists of a portion of tobacco pipe. Sir Astley Cooper used to relate a case in which the nucleus was a silver toothpick." Another case where a man had passed the wooden handle of a steel pen into the urethra. Also another case where a wire hairpin

(such as ladies use) was taken from the urethra of a man. Another case was that where a piece of French chalk was found in the urethra, also two other cases where a fish bone and slate pencil was taken from the bladder.

A few years ago, in Ohio, while Mr. M. was feeding a threshing machine, some wheat beards found their way through his clothing and one of them entered the urethra. Being in a hurry, he foolishly neglected to give it attention until the machine stopped. When he went to remove it, it had entered so far into the urethra that he was unable to get hold of it. As it seemed to give him no special uneasiness, he concluded to let it alone, thinking it would shortly come away with the urine. However, in a few days an inflammation was set up and an abscess formed near the root of the penis. After a number of days of the most excruciating suffering, the abscess was opened and a large quantity of pus discharged, nothing, however, was seen of the wheat beard, but several days afterwards it came away in the urine, it had retained its form perfectly but its color was changed to a deep black.

The above cases should teach us one important lesson, and that is, when called to attend a case of retention of the urine, and especially in children, to thoroughly examine the penis and urethra for some foreign body, for it is a fact that children are frequently in the habit of introducing foreign bodies into all of the openings of their bodies, and a little attention to this fact might frequently prevent the physician from making a mistake in his diagnosis and also prevent him from falling into a very unpleasant and awkward situation.

FRANK M. JONES, M. D.
Strong City, Kan.

[For the Brief.]

Caulocorea.

EDITOR MEDICAL BRIEF :—Formula:
 Caulophyllum thalictroides, viburnum (opulus or prunifolium), aletris farinosa, dioscorea villosa, mitchella repens, Hoffman's anodyne.

Case—Mrs. L., age forty-eight, had suffered for eight years with loss of flesh and indigestion, attended with loss of appetite. Had been treated by several physicians, and tried various recommended drugs to arrest waste of flesh, with little or no good result. About a year ago, I advised her to try caulocorea, which she took for some time. I found that after two weeks' exhibition, her skin, which had been dry and husky, became moist, and her complexion a better color, also appetite improved, and several articles of diet which she could not eat before without causing diarrhea, were now taken with appetite and good digestion. I continued the use of the remedy for several weeks, and find her health greatly improved, has gained many pounds in weight, complexion good and energy renewed. This medicine is by no means unpleasant or unpalatable.

I might mention several cases to show the efficacy of the remedy in troubles of digestion and nutrition. Its specific action is strongly manifested in the ganglia and the spinal cord and sympathetic, acting to restore the inertia of the pelvic organs as well as the genital centres.

Dr. I. J. M. Goss, of Ga., in his "New Remedies," says of viburnum prunifolium: "It has many properties in common with viburnum opulus, but differs somewhat in many respects. Both of these plants have the smell of valerianic acid, and undoubtedly contain it. Its most valuable therapeutic use is its preventive power over threatened abortion. For

some twenty-five years I have used this article in cases of habitual miscarriage, and have never failed when I saw the case in time. It is a very positive remedy in after-pains. It antidotes cotton-root, when the latter is used to produce miscarriage. It completely neutralizes the effects of gossypium, compelling the criminal mother, however unwilling, to carry her offspring to full term. As an antispasmodic to the uterus, it removes many of those harrassing nervous symptoms that so often torment, wear down and disqualify the pregnant woman for the final parturient effort. In dysmenorrhea I have found no remedy so prompt and kindly acting as viburnum. In menorrhagia it is a very valuable remedy. The viburnum opulus has similar effects upon the female reproductive organs.

Says Dr. Line, in *Mississippi Medical Monthly*, of the two viburnums: their action is supposed to be somewhat similar, antispasmodic with a specific influence upon the uterus, nervine antispasmodic, diuretic, astringent, tonic.

Aletris farinosa is another uterine tonic, not inferior to caulophyllum. Dr. D. P. Duncan, of Ga., says, without fear of successful contradiction, that aletris farinosa stands unrivaled as a uterine tonic. I have used it in irregular and suppressed menstruation, and have yet to see one single failure. As a matter of fact, uterine tonics act better when combined than when given in Galenical prescriptions.

Dr. J. W. Lowell, of Portland, realizing this, used a preparation efficient and, at the same time, pleasant, and has presented to the profession a combination of the best known uterine tonics and sedatives under the name of caulocorea. After giving the formula, he says: "In dysmenorrhea we have cases where the flow is both ex-

cessive and deficient in quantity. By the curative influence of caulocorea these two opposite conditions are alike relieved." For pain in the back "and headache," the above combination may be relied upon as a speedy dispeller. In many cases of prostatorrhea and spermatorrhea, it has been equally successful, owing, I presume, to Hoffman's anodyne there-in contained.

Baltimore, Md.

[For the Brief.]

Answer to Dr. J. Lee Drewry's Obstetrical Case.

EDITOR MEDICAL BRIEF:—The case which you have reported in the May number of the BRIEF has been a very interesting one to me, in view of the fact that I have never seen anything exactly similar to it.

In return, I will endeavor to answer your two questions on the subject and, may be, by so doing ease your evidently troubled mind from even a suspicion of carelessness.

In the first place, you had in the beginning a most unpromising case before you. Your patient was evidently moribund at the time of your arrival, being cold and nearly pulseless from repeated hemorrhages covering a period of two weeks (and probably more than this).

Called to a patient of this kind, what was to be done, the patient being in labor? Evidently to stop the bleeding—to save enough blood to keep life in the patient—and the quicker the better. The great demand for immediate action would exclude any thoughts of a consultation and you are left to your own best resources.

The best way then to stop the hemorrhage, would be the only question to consider, and in this, as in

many other matters, opinions vary. Some might advocate plugging the vagina, and then waiting patiently until the os uteri had become fully dilated with the expectation, at that time, that the uterine contents might be expelled almost *en masse*. Such a procedure could hardly have proved a success in your case, however.

You might, possibly, by plugging the vagina and stimulating the patient, have delayed the inevitable result, but scarcely more than this could have been accomplished. My experience has been that frequently, after plugging the vagina carefully and effectually, there will be found more or less hemorrhage back of the tampon, sufficient in your case to have allowed a fatal result in much the same way that it did occur.

The next course would be to turn and deliver. This would have been decidedly the best if it could have been performed in an otherwise normal case—and in your case, most decidedly it was to be thought of, at least on the plea that "while there's life there's hope." Yet stronger than this faint hope, was the fact that the child presented abnormally, which of course created a necessity for intra uterine manipulations in order to insure the life of a viable child. Thus a two-fold reason existed for the course which you decided to pursue—the life of the mother, by arresting and preventing the hemorrhage, and the life of the child, by correcting a false position and facilitating delivery.

That you were not able to do this immediately, was not your fault (yet seemingly your misfortune), as the woman's condition at that particular time, was such as would preclude any such decided mode of procedure. You attempted to change this condition of affairs in your patient, in the

short space of fifteen minutes, during which your patient died—which she probably would have done under any other treatment. Though it is quite easy to speculate on such cases and suggest a line of treatment that might have saved the patient, yet, taking the case as it stands—a moribund patient in the first stage of labor, shoulder presentation, and placenta prævia, I should say, that without the serious obstetrical operation of turning, the patient would die and the child likewise. With the operation the patient might die and the child probably live.

In conclusion, the patient succumbing so soon after your arrival, while you were making laudable attempts which proved futile, the only suggestion which might be in order under the circumstances would be a "Cæsarian section" which probably, as usual, would not have been allowed.

J. H. BURCHMORE, M. D.
N. Evanston, Ill.

[For the Brief.]

Colic.

EDITOR MEDICAL BRIEF:—In response to Dr. Spangler's request for treatment of colic, I will recommend the following:

- R. Tinct. Gentian..... 4 ounces.
- Tinct. Cardamom..... 4 ounces.
- Ext. Nucis Vom. fl..... 2 drachms.
- M. Sig.: Two to four teaspoonfuls in wineglass of water before meals.
- R. Acid Mur..... 4½ drachms.
- Sacch. Pepsin 6 drachms.
- Glycerine..... 1 ounce.
- Aquæ 4½ ounces.
- M. Sig.: Teaspoonful in half tumblerful of water after meals, drawn through a tube.

If there is constipation, use Fothergill's after-dinner pill, modified thus:

- R. Powd. Aloes Soc..... 20 grains.
- Powd. Ipecac..... 20 grains.
- Powd. Gum Myrrh..... 20 grains.
- Strychniæ Sulph..... 1 grain.
- Ol. Capsici..... 8 drops.
- M. ft. mass. Sig.: Make twenty-five pills and give one daily after dinner.

Should the bowels be sensitive to aloes or ipecac, the proportions may

be reduced to suit the demands of the case; and if the pill should be used, the dose of the tinctures and ext. nux vom. should be reduced to one teaspoonful.

The regulation of diet is an important factor in the management of all morbid conditions of the alimentary canal. In this case, smoked meats, except, perhaps, small quantities of broiled ham, pork and mutton will most probably disagree; but good beef, especially broiled steak, will doubtless be well borne by the stomach. Boiled sweet milk, beef-tea and bland nutritious soups will be acceptable, with rice and other farinaceous articles. Coffee and tea should be avoided; and such vegetables as cabbage, sweet potatoes and onions are unsuited to this and all similar cases. Pills of ipecac, containing from half to one grain each, taken after meals is an excellent remedy alone, stimulating the peristaltic action of the stomach and bowels, and by this means removing the accumulations of gas, and, also acting slightly on the liver. Understanding the pathology of the disease, the doctor will recognize the therapeutical application of the remedies above, as well as the great importance of dieting his patient for a while.

R. T. BYRD, M. D.
Boligee, Ala.

[For the Brief.]

Something New.

EDITOR MEDICAL BRIEF:—A few days since, I was halted on my way by a man having something carefully wrapped in a paper, which he said was a worm that had passed from his urethra some two weeks previous.

The animal was about the size of a common broom straw, one and a half inches in length, head shaped like that of a bug, with six or seven joints each an eighth of an inch in length.

The history of the case is that the man had symptoms of what he called gravel, and had passed a small worm like this some six weeks before. This being of larger size than the first, he suffered much more until finally he passed the worm so far as to grasp it with the fingers and remove it, when he was entirely relieved of the gravel symptoms.

I contribute this communication for the following reasons:

1st. That, if possible, the sufferer may obtain a remedy for this strange malady, since these animals, viz: vermin, are generally prolific, and the different kinds require different treatment. This is entirely new to me and there is no known remedy.

2d. That the profession may see there is yet room for progress.

E. B. HAMPTON, M. D.
Jonesville, N. C.

[For the Brief.]

Erysipelas—Universal Ointment.

EDITOR MEDICAL BRIEF:—Mrs. W. is slowly and steadily improving. She is now, April 18th, able to be up and around the house; no change in treatment except to leave off drugs as they were less needed. In April number of BRIEF, page 147, eighth line from top, right column, should read: "Fresh butter beats cod liver oil as food or medicine, and is a thousand times more grateful to the stomach," etc.

Dr. C. H. Jameson of Farmerville, La., should use a local remedy in erysipelas.

R. Bismuth Sub. Nit. 1 drachm.
Iodoform 1 drachm.
Ol. Citronella 10 drops.
Cosmoline 1 ounce.

And if there is much pain, add morphia sulph. five to ten grains, or, if you can afford it, apply a small quantity of a two per cent solution of muriate cocaine before applying the above

ointment. This is far better than iodine, nitrate of silver, caustic potash, etc. I have used the above, with the happiest results in burns, frost bites, piles and kindred ailments. I think the above ointment would be the best Dr. F. Scherer, of Pittsburgh, Pa., could adopt as a universal ointment.

While I am writing there is one more prescription I must give as a local remedy in erysipelas, that is:

R. Acet. Plumbi Pulv. 1 ounce.
Fresh Thick Cream 2 ounces.
Either with or without morphine.

The above should be applied three or four times during the day and night. As an internal remedy in erysipelas, I have had the best results with large doses of tincture chloride of iron, say ten to forty drops, three to six hours apart. Of course each symptom should be met with the remedy indicated. G. W. SHELTON, M. D.
Johnstown, Mo.

[For the Brief.]

Intolerable Itching.

EDITOR MEDICAL BRIEF: I appeal to the many readers of your most valuable BRIEF to contribute something for this almost intolerable itching. I have exhausted my whole therapeutical endeavors, and accomplished but little.

The case of which I speak, is Mrs. G., age about twenty-four, light complexion, sanguine temperament, and enjoys good health until the third or fourth month of gestation. Then this itching sets up and she has no peace for three or four months, then a premature labor gives her relief. The itching is general. No cutaneous eruptions. Has had one abortion, and three premature labors. Now, dear brothers, what is the matter, and what shall I do for her relief?

Poortith, N. C. J. J. ROWE, M. D.

[For the Brief.]

**Obstetrical—Spotted Fever—Passage
of Gall-Stones.**

EDITOR MEDICAL BRIEF:—On the evening of April 27th last, I was called nine miles from the city, to see Mrs. L. Found her resting well and not looking at all like she needed the attendance of a physician. On inquiry I learned that the night before at the hour of eleven o'clock, she had arisen from her bed, walked into the yard, and, while in the act of voiding urine, passed a foetus six or eight inches in length. She walked back to her room and informed her husband what had happened. All next day she took warm teas in order to pass the after-birth, but to no effect. She assured me, that she had felt no pain at any time, and not the slightest hemorrhage had occurred. Said she had slight bloody discharges occasionally, for three weeks previous, but had felt uncommonly well during the time. On examination I found the mouth of womb closely contracted around the cord. Gave broken doses of Squibb's fluid extract of ergot, about every fifteen minutes, until midnight; no pain, patient slept well a portion of the time. I decided to wait no longer on medicine, as it was having no effect, and placenta had been retained twenty-four hours already. Placing patient over a tub, and with a Davidson syringe I bathed the womb, with water as warm as could be borne, until three gallons were used, each being of a higher temperature. Still no contraction or change of condition, whatever. Patient took a recumbent position, and I introduced my hand and endeavored to dilate the rigid os with my fingers; this I effected enough to place with my left hand the nozzle of a syringe between them, and with

the help of an assistant, another gallon of warm water was thrown into the womb. This had the desired effect, the os became soft to the touch, yielding readily, so that I grasped the placenta and brought it away; the womb contracting nicely. A birth, after quickening without pain, complete contraction of womb, and no hemorrhage, was something I had never before witnessed nor heard of. It may be that many of your readers have had a like experience. I know not, but if so, may not some modern physiologist yet learn how to change the order of things and make labor altogether painless, by toning up the nerves and muscles to this effect; dispensing with the use of anæsthesia? Patient has had no further trouble up to this time. General health very good.

If Dr. S. W. Weaver, of Paradise Valley, Nev., will consult Flint's Practice, page 709, under heading of "Cerebro-Spinal Meningitis," I think he will find all the advice he needs concerning "spotted fever."

Will some of the brethren give treatment for a patient afflicted with hepatic colic (or the passage of gall-stones), that will effect a cure and stop the process altogether? Patient is fifty years old, has been a healthy man until past twelve months. He is a farmer, no bad habits. He is also subject to becoming unconscious in sleep, struggling for breath, muscles becoming tense for a time, then passes off without the knowledge of patient, leaving no bad effects.

I am using bromide of sodium, and iodide of potash, for the gall-stones; have tried the olive oil. Will some of the brethren who have had experience in these troubles, please help me? My patient is an only brother.

J. P. KELLEY, M. D.
Clarksville, Tex.

[For the Brief.]

Cholera and Other Themes.

EDITOR MEDICAL BRIEF:—I promised to continue the great international subject—cholera. And I might go on and theorize till doomsday without arriving at anything definite. And yet, I can but stop to condemn the *bacillus*, if it is claimed that it is the remote cause of cholera. It bears the same relation to cholera that the maggot does to carrion, or the mushroom does to decaying matter.

Cholera is an electrical phenomena, in which the normal course of the electricity that is peculiar to mankind, is caused to vary a few beats per second. You can never police or quarantine against epidemic cholera, save by accident, till you have invented the meter by which you can find the number of vibrations of cohesion—a *cohesiometer*. Cohesion is force, *vice versa*: force is vibration, *vice versa*. Matter is simply electrical phenomena vibrating in the sphere of its own cohesion, manifested to our senses by our own peculiar cohesive force. The universe is an *infinite solid*: and man is an accumulation of atoms vibrating a number of times per second peculiar to that phenomena termed man. When his cohesive force fails for a certain time to beat right time, the atoms fly apart and the phenomena ceases. I believe that there remains *another* phenomena which I can not see because it is of higher vibratory force than my own normal optical vibrations can reach, retaining cohesion peculiar to itself.

Cholera, like small pox and all other manifestations, whether chills or insanity, is a collision of a concentration of two phenomenæ, each having cohesibility peculiar to itself. Each body is constantly coming in contact with other bodies or phenomena, tangible or intangible, ponderable or im-

ponderable, containing properties, if continued a certain time, which are capable of interrupting existing continuity. We have a pain here, a sore there, or other manifestations ever reminding us that we are not permanent—that, somehow, our cohesive sphere is being continually assailed by conflicting forces.

In 1873 I treated two cases of cholera; and I am satisfied that I allayed a local epidemic, so to speak, by declaring the disease to be *cholera morbus*. A few-days previous to that time, some thirty had died of cholera within fifteen miles of me. By force of my firmness in holding out against odds, that it was not cholera, and the giving of Hartshorne's recipe, I cured both cases; and no others took the disease.

Hartshorne's recipe:

R. Chloroform.....	1½ drachms.
Tinct. Opii.....	1½ drachms.
Spts. Camph.....	1½ drachms.
Spts. Amm. Arom.....	1½ drachms.
Creasote	8 drops.
Ol. Cinnamom.....	8 drops.
Spts. Vin. Gall.....	2 drachms.

I began within two hours after each attack with this, and ended the attack with it. I dissolved a teaspoonful in four tablespoonfuls of cool water; gave a teaspoonful of this solution every five minutes for a few hours, gradually lengthened the interval till the trouble ceased. It had been pronounced cholera—I do not doubt it. I had never seen a case before; have never seen one since. No others took it in my territory.

An old lady once told me that, during a fearful cholera epidemic, she was awakened one night at about one o'clock, by a terrible vibratory sensation, and a feeling of being utterly forsaken. As she expressed it, a sensation that one might experience by believing that a burglar was standing in the dark by his bedside. She said that this flashing, vibratory sensation would run on and off, and when off

left a feeling of dread as though some horrid thing was standing by her bedside waiting to pounce upon her. Others, she said, had been attacked by cholera this way, and she had been with them, but had never felt the least afraid of infection. She had gone to bed in her usual health; but immediately knew that this was a mid-night visit of cholera.

"Then," said I, laughing, "Mrs. La Chapelle began praying in good earnest, didn't she?"

"No, sir; I didn't," said she, shaking her very gray locks, and went skipping over the floor, with her eighty years, as gay as a girl of sixteen; "I had said my prayers before retiring, sir, doctor; and I was too sleepy to do anything but go to sleep again."

"Well, what did you say?"

"Well, I said: 'No, sir; not much! I take no cholera in mine to-night;' and I turned over and went to sleep."

"When I awoke in the morning," she continued, "I found that several had been attacked with cholera during the night in the same manner, and at the same hour in which I had received the call. Many died; some recovered."

Was this *bacillus*, *microbe*, or what? If so, did she destroy it by force of her will? or did she *repel* an electrical shock by her great cohesive quality? Her inherent indestructible vital phenomena simply drew closer together the atoms of its visible sphere and said: "I take no cholera in mine to-night."

I think the "line" has been drawn around Dr. K. Taylor quite enough. I do not believe that he was excited, as has been charged. Let me say here that, when he allowed his patient to be raised up on the chamber, he saved her life. I am satisfied that her appeal was very urgent, or else he would not have allowed her to rise at all. I

have had them to cry, "Oh, do! oh, do! dear doctor, let me get up;" and I have never regretted letting them up. What if she did faint; that was only a negative condition by which right force asserted itself. Suppose that the soul had winged for flight, could you, who have drawn the line about Dr. Taylor, have arrested it? Of course, it is not well in our day and time to trust our mothers to their unaided cohesibility; but I have learned to keep hands off nine times out of ten, and sometimes the tenth. And just only snap your obstetrical forceps near the average country parturient and you'll deaden every tap of normal throe, and the shock which she will communicate to her child will often strike it like lightning.

I sincerely thank those who have borne with me in my poor sketches, and have designated me by name from time to time. I regret that my articles have not been more interesting and practical thus far. I hope you all will understand that when I speak hard of the "profession," I use quotation marks and do not allude to those tried and true physicians like Cornicus and Kominski. I did start out to claim all the bad of every "doctor" whom I have known; with all their ups and downs and mistakes. Some things which I have recorded against myself did indeed occur to my knowing—certainly not to that poor boy whose name is on the Matriculation Book of the "Ohio," session 1867-8. But I find that I shall have to change my tactics, or I may get our State Board of Health on my shoulders. The funniest thing which has occurred to me of late, is receiving a copy of the Code of Medical Ethics of the American Medical Association. I would say to the sender that I have not aimed "contumelious sarcastic remarks relative to the faculty as a body." Right codes and

dogmas I respect as much as any man. And if I should "jocularly tell of lives lost," or murdered, as it were, I simply make same remarks in levity as the ruffian who really committed the murder is supposed to have done. The "black bottle," you all know, too frequently attends the physician. I have seen the sick wait for a doctor to sober up, when they would not wait for one, equally as good, to say his prayers.

Apropos of Doctor DeArmond, on page 181, May BRIEF: I am satisfied he does not allude to any of my hard expressions "reported some three months since;" but, some two years ago, condoling with "M. A., M., D.," I said, "we all have got it somewhere;" meaning that we all have our faults.

The phenomena of self-pollution is not *sin*; it is *folly*. I pity the poor creature who can not tear away from it. Because a person practices it, it does not necessarily follow that he is bound to go to hell or the insane asylum. I say it, and I say it in the teeth of the profession and of the whole world, that, the self-pollutionist, whether male or female, stands head and shoulders above the drunkard.

Above all, give me the man who marries one little woman and both, hand in hand, do the best they can. Perhaps the "medical man" confessed his own fault as "one to another." St. Paul's success consisted in his confessing to the penitent that he had committed a like sin. The lawyer is not (every time) guilty when he says, for his client: "We waive examination and ask to be sent to jail." The man who hallooos the loudest, "stop thief," is sometimes the thief himself.

Don't throw rocks; pour in oil.

Rockwood, Ill. D. F. CECIL, M. D.

[For the Brief.]

Corn Cure—Chronic Cystitis.

EDITOR MEDICAL BRIEF:—I see in May BRIEF that some M. D. signing himself "Corns" asks for a corn salve, and as I have been using a prescription with satisfaction to myself and patients I will give it. I think it is called "Hin's Corn Cure."

R. Acid Salicyl.....30 grains.
Ext. Cannab. Ind.....10 grains.
Collodium.....1 ounce.

M. Sig.: Apply every night for five nights, then soak in warm water and the corn can be removed.

Care must be taken to use a reliable extract of cannabis, or the remedy will prove worthless.

I wish to add my testimony to that of Doctor Sexton's, on the use of nitrate of silver in chronic cystitis, in May BRIEF, page 175. I use it in both male and female patients. I generally use a solution of about twenty per cent of nitrate of silver. In treating a male patient, I inject the solution directly into the bladder, directing my patient to hold it at least five minutes or as long as he can well bear it. I then let him pass it out through the urethra so it will come in contact with the glands at the neck of the bladder which we always find more or less diseased, then, to prevent any stricture from its use, in the course of three to four days I dilate the urethra with a medium size bougie, following this procedure after each injection. Now, sometimes, yes a great majority of times, we have stricture of the urethra as a complication or acting as the exciting cause. Yes, diseases of the sexual apparatus is in many cases the "man who struck Billy Patterson," as our able, and honored, and aged Doctor Wm. K. Bowling (whose name is loved by all who know him) would say. When I find stricture as a complication, I always use dilatation, commencing

with a small size bougie and increasing until I dilate the urethra to its normal capacity; always waiting three or four days after using the injection of nitrate of silver. As a constitutional treatment I prefer the tinct. ferri chlor. in twenty drop doses every four hours—Dr. Doane to the contrary—for it has fine diuretic and tonic properties.

I would like to hear more from the profession on this difficult subject, as Dr. Sexton very truly says, it is a disease of such common occurrence and our text books do not throw much light on the subject.

Perhaps Doctor Cecil could give us some one with some "ups and downs" in his waterworks.

Dr. J. Lee Drewry states his case and asks the profession what they think. Doctor, your patient did not die through carelessness on your part, for, from what you say, you were called too late. In a case like yours, Doctor, I should have used the tampon, after rupturing the membranes, if they had not been ruptured, then I should have resorted to the bandage and administered ergot. Your attempt to turn and deliver was good. Let Dr. Snort go; don't let him or anyone else know you are aware of what he says. When some old lady informs you of what Dr. S. says, smile it off with "that's what I expected of him," and no more; never get in a wordy war with any one. Study to do your duty and be honest with *all*, and my word for it Dr. S. will not be in your way. *I speak from experience.*

I admire the BRIEF, and who does not? I often think when reading its pages, and seeing the writings of so many doctors giving some gem of thought to its many readers, of the comparison of Matthew Arnold of the German and English Universities. He makes this wise remark: "We,

in England, try, in our educational system, how much it is possible to get into a man; in Germany how much it is possible to get out of him." We need no ghost to tell us which system will prove of greater benefit to the world. Therefore, I like the BRIEF, for it draws some thought from us all which goes to swell the stream of medical knowledge, and long may it live to throw its sparkling gems of thought into our midst!

R. A. HARRINGTON, M. D.
McEwen, Tenn.

[For the Brief.]

Vegetable, Animal and Mental Life.

EDITOR MEDICAL BRIEF:—While looking over the April number of the BRIEF, on page 144, I read a very interesting article written by Dr. B. Brown Williams, entitled "Life and Death," in which are a number of thoughts that to me are mysteries, and would like them further illustrated and proven. He says man, or conveys the idea that man, is composed of three lives—vegetable, animal and mental life; that if two of these are dead, the other remaining—it may be the vegetable—has the power of sustaining the co-ordination of the three, and thus bring back the other two to life again. He also speaks of apparent death and real death. True, we often see people who appear as though they were dead, as in the reference made by Dr. Williams, of a man struck on the head with a club. He is unconscious, but we can not say he is mentally dead, for "he is not dead but sleepeth." Were he mentally dead, life would never return again. We go to bed at night, and soon our eyes are closed in slumber and we become unconscious of the activity around us, we are not dead but sleeping.

Verdon, Neb. J. T. WEBSTER, M. D.

[For the Brief.]

Tracheotomy in Membranous Croup.

EDITOR MEDICAL BRIEF:—Was there ever a very severe case of membranous croup cured without tracheotomy? On April 6th I was called to visit a little girl aged six years; upon examination found her suffering from tonsillitis, with croupous indications. The tongue quite heavily coated, bearing upon the septic order, mucous membrane indicating to some extent, cynanche maligni tonsillaris, high fever, temperature 103°. The mother said the patient had given them more or less trouble for the last four or five days, and she had done all she could, and would now give the case over to me.

As usual in such cases, I prescribed

R. Tinct. Aconiti.....15 drops.
Tinct. Baptisæ.....1 drachm.
Pilocarpine. 20 grains.
Aque Dist. q. s. ad 4 ounces.

M. Sig.: Teaspoonful every two hours.
Inuncia.

R. Adeps Prep.....1 ounce.
Vaseline.....1 ounce.
Quin. Sulph.....25 grains.
Tinct. Baptisæ.....1 drachm.
Ol. Cuprum.....1½ grains.

M. Sig.: Apply a piece as large as a bean under each arm and in and around the umbilicus where the capillaries are the most numerous, every three hours.

On the 7th I called again, found my little patient looking and feeling much better. Fever had subsided considerably, temperature 100°, breathing easier, but still had that croupous whistling, more at night than day time. I gave instructions to continue the treatment as before, and left.

On the 8th I called again, patient free from fever, temperature normal. Told the mother I would not call again, but if it should be necessary at any time she could call me.

April 11, eleven P. M., I was called in haste, patient, as the messenger said, was dying. I found both tonsils so swollen that breathing through the

mouth was impossible, and my patient was dying from asphyxia. I at once lanced both tonsils, each side of each of the main arteries, liberating much blood and pus. Then, with my probang, pressed the intruding members to one side, giving the patient a much better chance to breathe. I then filled my atomizer with water, adding a few drops of aconite, and told the nurse to spray the throat every hour, and continue the ointment as before. I would go home and try to get a little sleep. But I did not sleep much. I did not like the appearance of things. That dusky hue of the mucous membrane, covered with plastic; tongue again coated; much difficulty of deglutition; the larynx, pharynx, in fact the whole posterior structure, was of ashen gray spots or white lymph, some of which were as large as a three-cent piece, and some smaller. The next morning about eight o'clock, I visited my patient and heard her loud whistling croupous struggles for breath, before I opened the door. As I went in, the mother said to me, "Doctor, the patient has been struggling in this way since four o'clock and we can not rouse her." I went to the bed and saw she was dying. I saw at once I had a case of membranous croup, just what I had expected from the start. I told the mother she could live but a few minutes. I stepped out and called to my aid Drs. Saylor & Jones, and prepared immediately to perform tracheotomy. After the administration of chloroform and all things ready for the operation, we discovered for the first time the thyroid gland being so ingorged with blood, that to perform tracheotomy would be almost instant death to our little patient. Even then the father urged the operation, that she must die any way. We said to him we could not be guilty of murder, and an op-

eration must result in death. We gave up the operation. The patient was again placed in my hands, all expecting she could not live more than twenty minutes. I at once sent for some carbonate of lime, with instructions to slack a small piece at a time in a way that the patient could inhale the hot steam, and for mustard to be applied the whole length of the spine. I went to my office and filled my atomizer with oil turpentine and oil eucalyptus, of each a half ounce, and gave directions to spray the throat of my patient as often as every half hour, first using it on the child myself.

R. Brandy.....1 ounce.
Carb. Ammonia.....1 ounce.
Aque q. s. ad.....4 ounces.

M. Sig.: Teaspoonful every fifteen minutes, until directed otherwise.

I had used the atomizer but once and the patient was relieved, and in two hours from the time the atomizer was first used in connection with the slacking of lime, the patient was entirely relieved and called for something to eat. The next day I discharged my dying patient as being well.

Now I do believe eucalyptus and turpentine oils are a specific for membranous croup. I found that the two oils put together would very readily dissolve the rubber wreathing, in connection with my atomizer, in a few minutes, and will dissolve the membrane in membranous croup; and why not dissolve the membrane in diphtheria as well? Try it, gentlemen, and report through the BRIEF. Spray from a good atomizer (I use the Phoenix) held four or five inches away from the patient's mouth, opened wide, with the tongue depressed, will be thrown clear into the lungs and every part of the bronchia and trachia wet.

F. A. JOHNSTON, M. D.
Portland, Ore.

[For the Brief.]

Answers to Inquiries.

BY I. J. M. GOSS, A. M., M. D.

EDITOR MEDICAL BRIEF:—Dr. A. Noxon, Toronto, Can., asks for a specific in post-nasal catarrh. There is no such thing as a specific in disease. If the doctor will use Lloyd's white fluid hydrastis, as a nasal wash, say

R. Hydrastis—white fluid ext. 4 drachms.
Sodii Chlor..... 2 drachms.
Loaf Sugar..... 1 ounce.
Aque..... 6 ounces.

Use with a syringe, or spray apparatus, or by snuffing it up the nares, three times a day.

As regards the treatment of leucorrhea in the little girl, he will find cimicifuga (tinct.) ten drops three times a day, and a wash of permanganate of potash, three times a day, of proper strength say two to three grains to one ounce of water, to be very good treatment. Some cases get well by using the above remedies and injecting with, or washing with (if it is from the vaginal surface) the boracic acid, saturated solution. These remedies often cure leucorrhea.

Dr. J. O. Wilcox, Buffalo, N. C., asks for help in a case of alternate myalgia and asthma. His is a case of a want of the proper nourishment to the nerve centres. Give the phosphide of zinc or the hypo-phosphite of iron and lime, in due doses, three times a day and report the result.

The corn salve man should sign his name, if he wants a corn salve. Sign your name.

Dr. R. C. Bogle of Fosterville, Tenn., asks for treatment for three cases. Case 1, a lad ten years of age, began to have spasms at three years of age. This boy can be cured by strict dieting, and giving—

R. Sodæ Brom..... 1 ounce.
 Amm. Brom..... 1 ounce.
 Zinci Brom..... 2 grains.
 Tinct. Stramon. Sat..... 2 drachms.
 Aquæ..... 16 ounces.

M. Sig.: Tablespoonful. If it makes him too sleepy, dose less.

Diet, milk and bread, no supper. Try these remedies.

Case 2. May be similarly treated, only the dose may be correspondingly less.

Case 3. May take the same remedies, only in addition, give her the chloride of gold in solution, made by adding one grain of the chlor. gold, to one ounce of water; dose, two drops after each meal.

Dr. J. W. Abernathy, asks for treatment for numerous symptoms, all referable to a stomach *tired down* and *given out*. Rest your stomach and bowels. Use lighter diet, and take five drops of tincture of nux vomica before meals, and eight drops of tincture belladonna at night, to regulate the bowels.

Dr. F. J. C. Griffith, of Annapolis, Ill., asks for treatment for a man who passes blood with semen. Give him five drops of the fluid ext. of hamamelis three times a day, say one hour before each meal, and let him rest the organs.

Dr. S. W. Weaver asks for pathology of what is called "spotted fever," and asks to be referred to a work where it is described. It is described in my *Practice*, under the proper name. The symptoms point out this as a modified cerebro-spinal meningitis. (See the author's *Practice*, page 455.) It is called "brain fever," "pernicious fever," "malignant typhus," "exanthematic typhus" and "spotted fever." I have passed through two epidemics, and find aconite and belladonna, with counter-irritation to the spinal column, to be the proper treatment, if it is commenced early.

Dr. E. E. Philips, of Greenville, Tex., asks for treatment of dyspepsia. I have given the treatment in the MEDICAL BRIEF some ten or fifteen times, but will give it again. In many cases the liver and bowels are sluggish. If so,

R. Ext. Cascara Sagrada fl.. 1 ounce.
 Ext. Senna fl. 1 ounce.
 Ext. Euony. Atropur. fl. 1 ounce.

M. Sig.: One drachm at night.

Then to tone up the stomach, take one ounce of fluid extract of hydrastis, forty drops tinct. of nux vomica, and give thirty to sixty drops before each meal. Allow the patient only a milk and bread diet.

Dr. G. J. Red's case of lost manhood is one that I meet with frequently, and cure them generally by giving them damiana in doses of thirty to sixty drops three times a day.

Dr. J. B. Jones asks "if women lose sexual desire wholly, partly or entirely?" That depends almost altogether upon how they have used the sexual desire. If they have abused it, they, like men, lose it entirely. Most women who have husbands with no better sense than to abuse this desire, lose this desire, at, or soon after the cessation of their monthly discharge. And I have just prescribed for two young married women who have wholly lost sexual desire, both from having beastly husbands. Had a case where from early self-abuse, a married lady had lost all sexual desire. Thousands of people are bringing themselves to premature decay, and loss of power by abuse. Marietta, Ga.

ACCORDING to a writer in the *Chemical News*, the painful burn produced by nitric acid may be successfully treated by a dilute solution of sulphurous acid applied instantaneously.

[For the Brief.]

Information Wanted.

EDITOR MEDICAL BRIEF:—Can any of the subscribers of the BRIEF give me any information in regard to M. Zenno's method of obtaining oxygen? It is said to be obtained from potassic permanganate and baric peroxide placed together in water.

I would also like to have some one give me the formula for "Dr. Ludlum's Specific."

C. B. RICHMOND, M. D.
Topeka, Kan.

[For the Brief.]

Epistaxis.

EDITOR MEDICAL BRIEF:—I read your journal carefully and think it one of the best journals for the busy practitioner I ever saw, and by your permission I would like to report a case that came to my notice in January last.

Mr. B. W. consulted me in January last in reference to epistaxis; he was bleeding profusely from both sides of his nose and had been for several days. His age was thirty-five; married several years; was very much debilitated from loss of blood; skin dry; pulse quick; heart laboring very hard; had several attacks of malarial fever during last summer. I injected a saturated solution of tannic acid into the nasal cavity several times, without any benefit whatever; then tried acetate of lead with same result; I then used simple tincture of iodine in the same way as described above, and finally, by advising him to take inspiration through his nose and letting it return through his mouth, succeeded in forming a clot. I advised him to return home, with directions to take acetate of lead every three hours, and for some one of his family to go through with the same treatment, provided

the hemorrhage returned. But in a short time after getting home, the hemorrhage returned and another doctor was consulted, but he was again directed to me and I went through with the same treatment as before, but without any good results whatever. So I was again at a loss to know what course to pursue. But it finally occurred to me to plug the nasal cavity with cotton, and in that way formed a clot, and supposed I could surely stop the hemorrhage, which I did for a while, only to return with renewed vigor. Then I directed him to take ergot, tannic acid, with acetate of lead when lo! the hemorrhage was arrested externally, but, gentlemen, it was going on internally either from the posterior nares or the pharynx. And he continued in that condition for several days and became so debilitated that he was thrown into a kind of hectic fever; his stomach would become distended with vomiting of blood; bowels constipated; and at same time he would have hemorrhage from his bowels, resembling arterial blood, with symptoms of colic. I then kept him on quinine, tannic acid, acetate of lead and ergot, for several days, with some improvement, but finally his appetite failed him and his heart was laboring very hard. I then directed him to take tinct. aconite with tinct. of iron, three times per day. And that constitutes about all I have given him; he is up now going about, but his body, feet, and legs seem to be swollen, something like the dropsy.

Now, gentlemen, I have explained the case to you as best I could, and if the older M. Ds. would criticise this case and tell me how to treat such cases more successfully, I would appreciate it very much as I am quite young in the profession and willing to learn. JNO. Z. FERRELL, M. D.
Mount Sylvan, Tex.

[For the Brief.]

Dr. Bogle's Three Cases.

EDITOR MEDICAL BRIEF:—In response to Dr. Bogle's request in the May BRIEF, page 184, I venture to suggest a line of treatment, especially in Nos. 1 and 2, which in the main, describes some cases I had to treat, with unsatisfactory results, with bromides in various combinations, with ergot, belladonna, alteratives and anthelmintics. But after using the following I find written under my note of cases "Cured."

R. Chloral Hydrate.....2½ drachms.
Ext. Cyriped. fl.....½ ounce.
Val. Ammoniac.....½ ounce.
Tinct. Ment. Pip.....2 drachms.
Syr. Simp. q. s. ad.....4 ounces.

M. Sig.: Teaspoonful in a little water at ten and four o'clock, day and night. If spasms at night, give two to three times the usual dose on going to bed, for the evening dose.

And solution of strychnine one grain to the ounce, give ten drops three times a day and increase to twenty-five drops.

If these suggestions should prove any wise helpful to the doctor in his extremity, he will please note the same in the BRIEF; which we will ever welcome, coming to us as a sunbeam of advanced thought, laying the foundations deep of a common brotherhood; and casting a halo of light and worth over the pathway of the earnest toiler of our noble craft.

Reinbeck, Ia. J. L. POWERS, M. D.

[For the Brief.]

Ergot in Pneumonia.

EDITOR MEDICAL BRIEF:—I see that quite a number of the brethren are claiming wonderfully good results from ergot in pneumonia; but for my part I can't catch on to the *modus operandi* of the agent. Does it act as a tonic, sedative, anti-pyretic, stimulant, diaphoretic, or what? Does the remedy have an affinity for the pulmonary viscera? I have known pretty

severe pneumonias to end favorably in eight days without any medication. Does ergot cure in less time than that?

I have far too great a success with aconite, asclepias tuberosa, lobelia, alcoholic spirit, vapor bath, hot corn meal (mush) poultices, and proper alimentation, to cut them, in serious cases especially, for a new love. If ergot is as good a therapy, it has one advantage to commend it—it isn't costly. Some of my neighbors use immense doses of quinine right along, and get their patients up in from four to six weeks—what don't die.

F. A. EVANS, M. D.
Newbern, Tenn.

[For the Brief.]

Salt Rheum—Leucorrhea.

EDITOR MEDICAL BRIEF:—Will some of the readers of the BRIEF, please give me the benefit of their experience in curing salt rheum, which makes its appearance on the back of the hands, side of the wrist and on the ankles? It only troubles the patient in the winter. I have exhausted my knowledge without relief.

I have a case of a female thirty-five years of age, who is troubled with great soreness in the lumbar region in the center. She has leucorrhea quite badly and is very weak. She is not married. Will some of the contributors please give me a line of treatment that will cure her?

T. J. FARLEIGH, M. D.
Johnstown, Neb.

[For the Brief.]

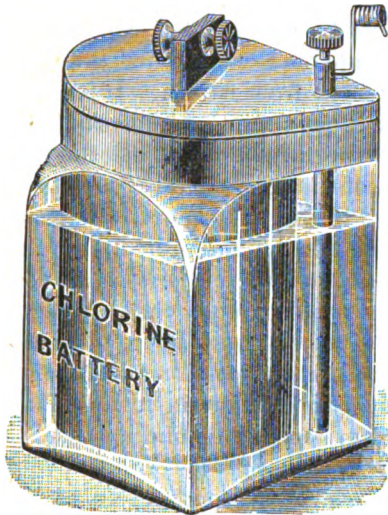
A Query.

EDITOR MEDICAL BRIEF:—Will some kind physician please inform me how to prevent ground stoppered vials from becoming fastened, and how to get the stoppers out after they are so? Double Springs, Miss. MEDICUS.

The Fitch Chlorine Battery.

BY I. N. GOFF, M. D., CAZENOVIA, N. Y.

At the recent meeting of the New York State Medical Society, at Albany, I promised a number of physicians to furnish a short account of a battery cell made in this place, by D. H. Fitch, and known as the Chlorine Bat-



tery. I have no interest in the matter, except to give to all interested just the information they require. The especial merits claimed for this battery, and which have been proved most fully, by practical use here, as well as in other places for the past five years, are its cheapness, the chemicals used being inexpensive and easily obtained of any druggist; its easy maintenance, as it requires no cleaning and very little care, not being taken apart or changed when not in use, or at all moved when needing to be replenished, which does not often occur, and, when necessary, costs very little; its freedom from fume or odor, which is caused by the absence of acids in its use; its durability and readiness for use; being free from corrosion and evaporation insures its

durability, while it will not freeze in the lowest temperature known in this climate.

The Chlorine Battery is intended to be used more as a stationary than a portable one. Thus it is adapted for office use.

Incontinence of Urine.

Prof. Bartholow points to four factors in incontinence of urine; acidity of the urine, and relaxation of the vesical sphincter being the most prominent; spasmodic contractility of the muscular coat during sleep as the third factor, and the fourth, which is comparatively rare, is dreaming of a desire to urinate, when the bladder is full (the brain being here at fault). For acidity of the urine, the persistent administration of bi-carbonate of potash, or some other alkaline salt of potash, in an effervescing draught, is advised. The incompetency of the sphincter is to be treated by half-grain doses of aqueous extract of ergot, and a quarter of a grain of extract of nux vomica. Bromides should be given at night to diminish the contractility of the muscular coat of the bladder. Many of these patients are anæmic, and the administration of iodide of iron is indicated.

Dr. VETROFF, painted with iodine the lumbar region of a patient in the prodromal stage of small-pox. The next day the part painted was found covered all over with variolous rash, while the rest of the body presented only two vesicles. Dr. Bojinski-Bojko also tried iodine painting in several cases in the prodromal stage, applying the iodine to the anterior surface of the thighs. In all the cases so treated the rash was limited to the regions painted, and the course of the disease was extremely favorable.

[For the Brief.]

Medical Legislation.

BY J. A. DE ARMOND, M. D.

EDITOR MEDICAL BRIEF:—The editor of the Iowa State *Medical Reporter* recently wrote to five hundred physicians in the State, with the object of securing their views on the subject of a medical law. A very large percentage of the replies showed that the writers were very anxious for the enactment of a law. A few opposed, while a few equivocated or dodged. One answered that he favored the law "if the people want it." That man hit the nail squarely and fairly on the head. Do the people want a law? Is there a grand uprising of the people, demanding that a law, which shall have for its object the guillotining of a lot of men who practice upon the ignorance or superstition of the people, shall be enacted? It may be that there is, but I have failed to hear of it. It is not to the credit of the profession that all this talk of a law and all the button-holing is done by doctors, when a law is enacted. Why the necessity for a law? Let us look at this matter.

Medical schools are getting so numerous that the graduates must of necessity, in many instances, be, to put it mildly, not up to a fair standard. From this rivalry for students, it so happens that almost anybody can graduate without any special reference to his previous education or his present impoverished mental condition. Intellectual dwarfs and mental ciphers get diplomas. After this sort of thing has been going on for some time, is it any wonder that to the civilian there is a mixing up of the sheep and the goats? No man can possibly tell where the doctor stops and the quack begins. And the people see all this. They know that a little bit of a third-rate

college, with very average professors, in a city of a few thousand people, where clinics must be few, can not make skilled surgeons and safe practitioners out of illiterate boys who quit the plow but a few months previously. There is a great deal of mystery about medicine, to the people at large, but rest assured that there is not much mystery about medical schools to them.

Whenever any body of men want protection from outside sources, it should be investigated whether they are capable of keeping themselves protected from within. It is a decidedly cheeky thing for the medical or any other profession to ask the people to protect them when they in turn are not willing to protect the people. There can be no protection for the people, so long as these medical grist mills pass out such chaff as they do, and label all good flour. Whenever the medical profession will label only such sacks as contain full weight and good material, then and not until then is it in the least deserving of protection or even sympathy.

What kind of a law is wanted, if any? In the above noted correspondence it is frequently suggested that a clause should be admitted excusing from examination, by the proposed medical board, all who have practiced ten years or more. That is a loop-hole which ought to be closed early in the contest. Who ought to pass a creditable examination in practice, in diseases of women, and children, in surgery, etc., etc., better than those who have learned these things not only out of books, but have learned them by the bedside? "Oh, yes;" they say, "examine all the young ones, but let us old fellows go." That is wrong and the practice of it can not fail to produce mischief. If we start at all let us start on an equal footing. If a man is not fit to practice medicine, don't

let him slip in simply because he is too old to go back to sawing cord wood. Some of the most villainous quacks and charlatans it has been my lot to meet have been long, white-haired, sleek counterfeits. By what authority or what good end will be subserved by letting in the ten year men? The only one that exists honestly is that if all are to be examined or show good diplomas such opposition to the enactment of a law will be found in the ranks of the profession that no law will ever be made in the State. And that fact alone shows just how the matter stands. The "ins" propose to make it warm for the "outs." Medical schools are in favor of laws regulating the practice of medicine. Before we have any laws regulating the practice of the profession, we had better have some stringent laws regulating these mushroom colleges. The best way in the world to stop the circulating of counterfeit money is to stop its manufacture. To destroy what is already in circulation while the manufacture is going on is not the way to correct the evil. Just so it is with the doctors. They howl for protection from quacks, but at the same time they let a lot of their own number run a quack factory without even so much as a protest.

In defense of the ten-year loop-hole they say in substance that a little rustiness in anatomy, physiology, or chemistry must not be allowed to revoke a career that has been free from blame. Laws, however, are for the general good. In their enforcement they will draw down pretty closely on some. Nobody would think of enacting a law for the punishment of any class of penal offenders provided they were new beginners. If a law is to be enacted at all let us enact one which will fulfill the indications without any halts or side tracks.

It is very true that it is wrong, as is argued by the favorites of a law, that a man who has spent years of time and a small fortune in money to fit himself for the profession of his choice, to be classed with the mountebank whose capital is assurance without solid foundation, and whose knowledge of the healing art is too meagre for computation. To be made to stand on equal footing with such a man, is an indignity that needs and deserves correction at the hands of intelligence. But while we may and can prevent the closing of the breach which separates the competent and the incompetent, let us watch well that in our zeal we do not err and overdo the work in hand. In a republic such as ours we can safely trust ourselves in the hands of the people. Let us once show the people that we are deserving of a law, and we will get all the laws we need. Just now the fact of the matter is that a great many people are of the opinion that we do not deserve a law. They say "your foremost men are engaged in turning incompetent and unqualified doctors loose on an unprotected people." And they are right.

All this means that the medical standard should be raised. There is a surfeit of doctors in the land. When the profession show, by their actions, that they can keep the herd out it will be time enough to hunt out the goats. When that is done there will not be so much trouble in making a diagnosis. Now, it is not an easy matter always.

LeClaire, Ia.

Sweating of Phthisis.

For the sweating of phthisis, Prof. Bartholow advises :

R. Acid Gallici 1 drachm.
Ext. Belladon..... 2 grains.
M. ft. pil. 10. Sig.: Two pills at bed-time.

Cholera Infantum.

Dr. J. Lewis Smith (*N. E. Medical Monthly*):

R. Tinct. Opii.....16 drops.
 Spts. Ammon. Arom.....1 drachm.
 Bismuth Subnit.....2 drachms.
 Syr. Simp.....1 drachm.
 Mistur. Cretæ.....1½ ounces.

M. Sig.: One teaspoonful every two or three hours to a child of eight to twelve months, until vomiting and diarrhea are controlled.

An Important Invention.

As every progressive physician is anxious to learn of any new discovery in his line, which will enable him to treat the sick with better satisfaction to himself as well as his patient, it has been thought not improper to briefly make mention of an important invention in the interest of the surgeon and gynecologist. It seems somewhat surprising that, while in most things the physician is able to supply himself with implements which are well nigh perfect, until recently the want of a simply constructed, and at the same time *practical* chair or table for making examinations and for operative procedures, have not been filled.

Heretofore the physician, in order to possess a chair, at all suitable to his wants, has been obliged to pay an exorbitant price, and then only get an unwieldy, unsightly, and often ill-adapted concern. We believe the readers of the BRIEF and all others in the profession will be gratified to learn that a chair has been invented which will meet this want.

The Eureka Chair Co. of this city, after much labor and expense has succeeded in producing an operating chair deserving the approbation of the entire profession. We present the following cuts illustrating the chair. Fig. 1 appears simply as a

handsome office chair, having no appearance whatever of its real use.



Fig. 1.

Fig. 2 shows it in one of its positions for the treatment of cases in either the Sims' position or in the dorsal position. The chair, as the cut now represents, stands thirty inches high, but, as can be seen, it can be readily lowered to twenty-seven inches, or either end may be tilted, at the option of the operator. The very many movements of this chair would cause one not acquainted with it to think it complicated in its structure while the reverse is the fact.



Fig. 2.

Another advantage this chair has over all others is, it can be conveniently folded up, as shown in Fig. 3, to less than five inches in thickness, to be placed against the wall, or in a closet, or to be taken in the doctor's carriage to the patient's residence, if need be.

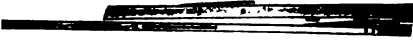


Fig. 3.

Altogether, it is the *multum in parvo* for the practitioner. Not all, however, has yet been told in favor of this chair; we believe it is the *cheapest* chair ever offered to the medical profession by nearly one-half.

A. J. MARSTON, M. D.
Worcester, Mass.

Iodine for Acute Diseases.

Dr. J. J. Berry, of South Norwalk, Conn., contributes a paper on this subject to the *New England Medical Monthly*. During the preceding year he had used iodine extensively—perhaps over a hundred times—in *acute non-syphilitic diseases*, with very satisfactory results. In *acute malarial diseases*, he has used iodine twenty-six times. His best results were obtained with the compound tincture of iodine, in doses of from ten to twenty drops every three or four hours. If given well diluted, and at the proper time, it seldom disturbs the stomach. *In other respects it is more acceptable than quinine*. In more *chronic malarial poisoning*, he uses larger doses, less frequently repeated, and, with it, arsenious acid in gradually increasing doses. These two drugs, used in conjunction with remedies which act specially upon the liver, seldom fail to cure. Donovan's solution is a valuable anti-malarial remedy.

In *gastric irritation*, one or two drops of the compound tincture of iodine, often repeated, is exceedingly valu-

able. In the vomiting of pregnancy and of chronic diseases, it is as efficacious as other remedies. Its alterative properties render it valuable in typhoid fever, diphtheria and like septic diseases. Observations show that typhoid fever patients who are treated with iodine have usually no high exacerbation of temperature and no symptoms of intestinal ulceration.

Schwartz, several years ago, claimed that, given in the initial stages of pneumonia, it cut the disease short. Moderately large doses, frequently repeated, have given satisfactory results in acute bronchitis and intense pulmonary engorgement. It is the most powerful anti-suppurative remedy which we possess. It is valuable in preventing the formation of pus in acute tonsillitis, and in controlling the congestion of these parts.

Treatment of Intestinal Hemorrhage of Typhoid Fever.

At a recent clinical lecture, Professor Da Costa exhibited specimens from a case of typhoid fever in which death had occurred from peritonitis, with three recent perforations of the bowel. The patient four days before his death had had a profuse intestinal hemorrhage. The distinguished teacher took the opportunity of endorsing the ergot treatment of the hemorrhage, but insisted upon the importance of following it up with decided doses of opium in order to prevent perforation or to limit its effect. —*Phila. Med. Times*.

Dunlap's Diarrhea Mixture.

R. Tinct. Opii.....½ ounce.
Tinct. Camph.....½ ounce.
Tinct. Ment. Pip.....½ ounce.
Tinct. Zinziber.....3 ounces.
Tinct. Capsicum.....½ ounce.
Hoffman's Anodyne.....½ ounce.

M. Sig.: A teaspoonful diluted with sweetened water, after each operation. This is especially good in cholera morbus.—*N. E. Medical Monthly*.

[For the Brief.]

Help.

EDITOR MEDICAL BRIEF:—Dr. Abernathy seems to be in trouble and wants diagnosis, prognosis and treatment. I think the doctor has ulceration of rectum. This can be ascertained by a thorough examination with speculum. If ulceration be present, apply locally three times a week, a lotion composed of castor oil, two parts; sulphurous acid, one part. Take three drops Fowler's solution after each meal. If this be the condition the prognosis will be favorable.

I will say to Dr. J. O. Wilcox, N. C., to blister his patient's spine from the third to the sixth dorsal vertebrae, and think of nothing at the time but reflex nervous action.

Senoia, Ga. R. T. HILLMAN, M. D.

[For the Brief.]

Nervous Deafness.

EDITOR MEDICAL BRIEF:—Mrs. B., aged eighty, came under my treatment first in November, 1884, complaining of a ringing, buzzing or roaring noise in her head. It first made its appearance in one ear—I think some two or three weeks before coming to consult me—and then in a few weeks the other ear became affected. The disagreeable noise is not confined to the ears, but the whole head is involved. For some time her hearing had been impaired, but greatly so since the present trouble made its appearance.

She is troubled with this "roaring" almost constantly—without any intermission—but at times better, and occasionally her head is perfectly clear, but only to last a very short time. And in the last few weeks her general health has suffered. Dryness of mouth and tongue, and appetite impaired.

Nothing that I have done—and two other physicians that have given her

treatment—has given any permanent relief.

I regard it as a purely nervous trouble. And from the description Dr. Gross gives of nervous deafness, and the symptoms of this case, I must term it nervous deafness. I have given her iron, the bromides, as general treatment, without any permanent relief, and for some time she has taken but little medicine during the daytime, but would take one dose at bedtime, from a mixture composed of brom. potass. and hyd. chloral. By this means she gets a good night's rest, but that "roaring" is still there as soon as she awakes from her sleep.

Now, if any of the many readers of the BRIEF can help me in this case and can stop that roaring and buzzing, both my patient and myself will be greatly pleased.

S. S. GOLDSBERRY, M. D.
Montmorenci, Ind.

[For the Brief.]

Cholera Morbus.

EDITOR MEDICAL BRIEF:—About two months ago I was sent for in haste to see L. O., a young man about thirty years of age. Being absent at the time, the messenger came the third time before he found me at home. Found him purging and vomiting, with no pulse at the wrist, and scarcely any perceptible action of the heart. The limbs, up as far as the knees, and the arms to the elbows, were icy cold. The discharges from the bowels were thin blood and water. He was restless and delirious, tossing about from one side of the bed to the other. It was then ten o'clock P. M. and he had been so since about three; the vomiting and purging beginning suddenly at two o'clock, after eating a hearty dinner. My father (Dr. F. Fear) had been called at about seven and had tried in vain to get warmth into

the limbs and arms by jugs of hot water. He had failed to get any medicine to lay on the stomach more than two minutes. The thermometer showed a temperature of about 98½°.

The friends had given him up to die, but I ordered more hot water in jugs and half-gallon self-sealing fruit cans, although they had already tried that, as they thought, sufficiently. I injected hypodermically, at once, about one-fourth grain sulph. morph., which checked the vomiting and purging inside of thirty minutes. We then gave whisky in small doses and put as many cans of hot water around him as would lay in the bed. About two A. M. the pulse began to beat feebly and I then repeated the morphia hypodermically and left him till morning, when I found the pulse tolerably strong. His recovery was rapid from that on for twenty-four hours, when, on trying to sit in a chair while his bed was made, he fainted, but soon regained his strength. He says, in his peculiar way, "I guess I would have went under if I had not been shot in the arm with that squirt-gun."

Waverly, Kas. J. C. FEAR, M. D.

[For the Brief.]

Thanks—Quinine an Oxytocic—Incontinence of Urine.

EDITOR MEDICAL BRIEF:—Allow me to thank Drs. J. H. Mayfield, J. E. Cowles and others, for suggestions by mail, as to treatment of my case of chorea reported in BRIEF. I have tried fluid extract cimicifuga, twenty-five drops, three times daily; bromide potassium, twenty grains, night and morning, and ferri carb. as an adjunct, and my patient is improving with fair prospects of recovering.

I can not agree with those who believe quinine an *oxytocic*. We have only to be reminded of the hundreds

of pregnant women living in malarial regions who must and do use the drug to break the paroxysms of fever, and to know the fact that the question of abortion, through its administration, never enters the mind of the patient or physician, to be convinced of the "fallacy regarding its abortient effects." I notice in a most excellent paper, by Henry F. Campbell, M. D., Augusta, Ga., on "Quinine in Pregnancy," where the doctor says: "That instead of withholding quinine from a fear that it may produce abortion or premature labor, I give it most punctiliously to *prevent abortion* or rather to prevent the paroxysms and the attendant calamities—abortion among them—that are threatened thereby. In the classic bluntness of Dr. Gooch, 'take care of the woman and the womb will take care of itself.'" Dr. Campbell's article on the subject appeared as a selected paper in *N. C. Med. Journal* of December, 1881, and is an able and convincing argument, worthy of a careful perusal by all who desire enlightenment on the subject.

Will some of the readers of the BRIEF give me the best plan of treatment for incontinence of urine, in a girl eight years of age, apparently more from force of habit than of any derangement of the sphincter of the bladder, etc.? Patient apparently healthy in other respects, yet continues, despite the usual treatment, to discharge her bladder alarmingly often both day and night.

GEO. E. MATTHEWS, M. D.
Ringwood, N. C.

Cholera Mixture.

R. Tinct. Opii 1 ounce.
Tinct. Camph 1 ounce.
Tinct. Capsicum 1 ounce.
Chloroform 3 drachms.
Alcohol 2 ounces.

M. Sig.: Teaspoonful after each operation.

• THE MEDICAL BRIEF.

J. J. LAWRENCE, A. M., M. D.,

EDITOR AND PUBLISHER.

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MR. FRANK LAWRENCE, son of the Editor of THE MEDICAL BRIEF, sailed on the steamer Servia, May 16, for an European tour. He will make arrangements whilst in London and Paris, for materially increasing the already large European subscription list of THE MEDICAL BRIEF.

[For the Brief.]

Belladonna.

EDITOR MEDICAL BRIEF:—While belladonna is an excellent remedy in some diseases, it is also a dangerous agent in some. Like digitalis, veratrum, aconite, gelsemium and several other remedies it has an accumulative effect, though this, however, is denied by some concerning all the

agents I have just mentioned. What is an accumulative effect? Listen! Give, for instance, digitalis—one-half to one drop every hour—and it will increase a slow pulse wonderfully. Give it in fifteen-drop doses and it will at first decrease the pulse rate, then accumulate, and the pulse goes hopping away at a lively rate. Belladonna in fractional drop doses contracts a dilated pupil; after the pupil becomes contracted, if the drug is continued, we witness its cumulative effect in the fact that the pupil gradually dilates. Belladonna is a powerful stimulant to the cerebro-spinal axis. It is specially serviceable in cases where there is cold extremities, pallid face, dull eyes, passive congestion—hebetude. Even in these conditions, however, it should not be given in some diseases—especially in puerperal fever. It is a powerful astringent. It will dry the mouth, act as an anti-galactagogue, and arrest the lochia. It should not be given in pneumonia after the third day. It should not be given at a longer period than eight hours without suspending its use for the same length of time. During the interval of suspension, asclepias or muriate of pilocarpin should be given. Belladonna is more serviceable in chronic than in acute diseases.

FRANCIS ANSON EVANS, M. D.
Newbern, Tenn.

[For the Brief.]

Parasites.

EDITOR MEDICAL BRIEF:—Please accept a few thoughts on a parasite that infests the intestinal tube and gives no end of trouble. Most every M. D. has had his little encounter with a tape worm and for my part must say, that in my early practice I had a great deal of trouble. Any severe cathartic that will increase the peristaltic action of the bowels may

dislodge the major portion of the worm, but will leave the head intact. I have treated a great many with happy results in every instance, by having them diet gently for two days drinking plenty of strong lemonade, to cut off mucous protection from the head of the worm, and then the first thing in the morning take one-half the mixture and the rest in one hour, and in three hours a generous dose of castor oil or infusion of senna to be given. I make the infusion in this manner: Take one pint of pumpkin seeds, bruise well in a mortar. Add a pint of hot water and rub well for a few moments and strain through a colander. My brethren, please hold up on your nauseous, injurious and diabolical compounds such as kamala, kousso, felix mas, and expensive pel le terems and try this method of treatment. I pause to blush behind this sheet to think of the many villainous doses I have given and the anguish I have wrought. Some old sedate matron will cure all your cases with this simple preparation if you keep on in the old groove.

A. V. BANES, M. D.
St. Joseph, Mo.

Ergot in Typhoid Fever.

A writer in the *Union Medicale* arrives at the following conclusions in regard to the use of ergot in typhoid fever:

It is similar in its effects to sulphate of quinine and cold baths.

It is especially useful in cases complicated with pulmonary or abdominal congestion, owing to its influence on sanguinary stasis and diarrhea.

It is antipyretic, its action being often very rapid.

It diminishes the pulse-rate, and regulates the circulation.

It rarely modifies ataxic and cerebro-spinal forms.

It can be used during the menstrual period without ill effects.

The dose must vary with the condition of the patient. In some cases from fifty to sixty-five grains must be given during twenty-four hours to obtain its therapeutic effect. At other times a much smaller quantity may cause derangement of the circulation.

The nausea sometimes caused by it need seldom occasion alarm; if it should continue too long the remedy may be given hypodermically.

Ergot should be given in small doses in order that its action may be closely watched.

With children it acts very favorably.
—*Physician and Surgeon.*

Pepsin.

Messrs. Wm. R. Warner & Co.'s Concentrated Pepsin in Powder is a preparation much appreciated by all who have occasion to use pepsin in scales, and especially where a concentrated article is required. It forms a clear solution, retains a pulverulent condition, and mixes with other substances. The use of this preparation in cases of ulcers of various parts of the body—particularly those of the stomach—has given very satisfactory results, from its power of dissolving albuminous products. This pepsin has been found useful as an application to diphtheritic ulcers; also for indigestion of children, who take it without much trouble. Again, this preparation is found very useful in nervous vomiting and diarrhea. I find this pepsin has many more times the power of digestion than the saccharated form. The advantages of Warner & Co.'s Pepsin—as indeed of all their preparations—are that it is uniform and reliable. — *Va. Med. Monthly.*

[For the Brief.]

Blood Clot in the Bladder.

EDITOR MEDICAL BRIEF:—I recollect to have remarked (in a letter to the BRIEF, telling Dr. Sherrill what should have been done in his case of blood clot in the bladder with stricture, terminating fatally in seventeen days, dated about the 4th or 5th of February), that we could always tell better what should have been done, for the cases of others, than we could have done ourselves. I am gratified that I said so much, since, on the morning of the 6th of February, a similar case came into my hands for treatment, and on February 13th, was buried.

Mr. F. B., aged seventy-two on April 9th, 1885, a blacksmith by trade, heavy, fat man, red face, heavy full features, but a man of remarkable common sense, though uneducated, was attacked several years since with locomotor ataxia, from which he partially recovered, but has had difficulty in articulation, and other symptoms of local paralysis since; his movements being unnaturally slow, and constipation very unusual. Subject to nervous chills. Consulted me in January last, as to purpuric spots appearing on his limbs, and on the night of the 5th of February, was taken at nine o'clock, with an unusual discharge of clear, limpid urine, both as to frequency and quantity, which suddenly checked up at two A. M. of the 6th, and I reached him at eight A. M., of the same day, finding the bladder enormously distended, hard, and yielding a hard, solid sound, upon percussion, heavy feeling, or sense of weight about the pelvis, inability to move the lower limbs to any extent. I attempted the introduction of a catheter, and met two spasmodic strictures in the puerile urethra, which being easily

passed, obstruction was again encountered at or near the prostatic urethra, which at the time I believed to be either enlarged prostate or stricture, but soon had reason to believe it to be resistance from the clot at the mouth of the cyst, because I penetrated it with a hard catheter, and after gentle rotation withdrew it, the eye containing small clots, and the body smeared with blood, and portions of clot following the withdrawal. I noticed also, just here, tenesmus or straining at stool with no result. I made an attempt to disintegrate the clot, with steel sounds, and subsequent evacuation by washing, using poultices and diuretics; these being unsuccessful, sent for Dr. B. Hales on the 7th, with instructions to bring lithotomy instruments, for cutting upon the perineum and removing the clot with forceps (as in stone). When he arrived, I had determined that he could not survive the operation, owing to the hemorrhagic tendency, exhaustion exhibited upon ordinary manipulation, etc. And we sent to procure the aid of Dr. Ben Walker of Danville (one of our best surgeons), requesting him to bring Jensen's pepsin with him; he got in on the 9th, at three o'clock, P. M., and after satisfying himself as to the nature of the case, again attempted to break up the clot with the steel sound, electro galvanism, and warm water, containing thirty grains of boracic acid to the pint of water, used with the double catheter. This plan brought away some broken clots, but not enough to make perceptible diminution in the hardness or bulk of tumor; both of these surgeons then left me, with instructions that I should repeat the process on the 10th. Before leaving, however, we threw up a solution of Jensen's pepsin (crystallized), thirty grains to the cupful of water, and, in

justice to it, I must say, that it was ejected as fast as introduced, not being retained sufficiently to test its digestive power over the clot. (I would just here ask some of the brethren, to experiment and report through the BRIEF, the power of this agent, in dissolving blood clot, and the relative quantities to be used, etc. I will attempt it myself.) The surgeons leaving at five P. M. of the 9th, at six P. M. the patient was seized with rigors, in which the surface became cold and clammy, although he had taken ten grains quinine, and one-fourth grain morphia, and ammonia soon after the manipulation; from this chill he never rallied, though whisky, ammonia, and other stimulants were used as much as possible to the end. The washing on the 10th was necessarily omitted on account of his extreme prostration. Now Dr. Sherrill gave no precedents in his case, or complications, other than stricture, which might have been obstruction, as mine evidently was, instead of stricture. His case lived seventeen days, mine lived six days and a few hours, dying on the 12th, at three P. M. Therefore, it becomes a question as to whether I am a competent instructor, or one needing much teaching. The latter would appear to be most likely. Dr. S.'s case, I presume, died from blood poisoning of putrid clot. Mine died either of inability to stand such manipulation as was necessary to remove the clot, or of purpuric exhaustion, and paralysis of the cyst, from one, or a combination of all of these causes, and I would like to hear from the brethren, as Dr. S. requested, as to what would be the best plan of getting rid of the clot.

Pace's, Va. SAMUEL HALES, M. D.

FOR obstinate cases of pulmonary hemorrhage that can not be controlled

by the usual remedies, Professor Bartholow recommends the administration every half hour of—

R. Ext. Ipecac fl 5 minims.
Tinct. Digitalis 10 minims.
Ext. Ergotæ fl 1 drachm.

M. Sig.: For one dose.

The ipecac will produce emesis in a short time. As soon as this occurs the bleeding will stop. Dangerous post-partum hemorrhage can be effectually checked in the same way.

ELEVEN cases occurring in the New York Hospital are cited as examples of toxic enteritis arising from the use of bichloride of mercury as a surgical application.

PERSISTENT HICCUGH CURED BY JABORANDI.—Dr. Pagenstecher reports a case of persistent hiccough cured in six days by a decoction of jaborandi after all other remedies had failed to exert any effect. The intervals between the attacks gradually became less, the contractions of the diaphragm varied from sixteen to twenty, to thirty and forty per minute. The pulse was very variable, ranging from 100 to 120 to 60 or 70. Respiration was frequent, averaging about 24 per minute. The patient was haggard, and during the last three days had not eaten for fear of vomiting.

During the progress of the disease, no remedy exerted any influence whatever. Finally faradization was tried and seemed at first to give good results. Improvement was, however, but temporary, and the hiccough became worse. As a last resort jaborandi was tried. A decoction of the leaves was made, and its administration was followed by its prompt therapeutic action. Perspiration continued about two hours, and at the end of that time the hiccough disappeared. —*Bull. Gen. de Ther.*

[For the Brief.]

Typhoid Fever.

EDITOR MEDICAL BRIEF:—I see it stated on page 100 of March BRIEF that "the weakness of the heart is one of the most dreaded symptoms in typhoid fever." Herein is stated a fact that I have long been familiar with. The writer adds, "the nervous energy of the system needs sustaining and the remedy at this time, especially when the first sound is weak, is minute doses of strychnine and belladonna."

Dr. Henry F. Campbell concluded a very lengthy report (over fifty pages) which he presented as chairman of a committee on the subject, before the American Medical Association, at its meeting in New York in 1853, on the "Nature of Typhoidal Fevers," with the following language: "To those who are in the proper field for such experiments, and possessed of the proper facilities, we would recommend the trial, in typhoid and typhus fevers, of such agents as are known to possess a direct power to stimulate the nervous system, even when in a state of partial paralysis, such an agent is *strychnia*. This we would suggest as applicable in minute but efficient doses, with the view of waking up and restoring the diminished energy of innervation, upon which the impaired function depends, in the same manner that we would advise it in other similar cases where the cerebro-spinal system was implicated.

"The above is all we offer in regard to treatment."

Dr. Campbell's valuable report made a lasting impression upon my mind, and modified my views in reference to the particular system (ganglionic) upon which it exerts its most deleterious influence.

Pathologists have enlightened us much as touching its destructive work

upon the human system, in tracing its footprints or lesions, but much yet remains to be evolved and revealed to us by the analyst, the etiologist and the therapist in regard to its origin, its nature and the best methods of treating it. J. L. DORSET, M. D. Dorset, Va.

[For the Brief.]

In the Wrong Box.

EDITOR MEDICAL BRIEF:—In the May BRIEF, Dr. J. B. Jones, of Mont Ida, Kas., writes to know at what time of a woman's sickness, or monthly periods, she loses her sexual desire. We are inclined to think the doctor has got into the wrong box. Would his question not be more appropriately answered by the women's aid society? I am an old man, and would think from what I have learned of women, that the doctor would get a better and a more correct answer from the women than he could possibly get from the male readers of the BRIEF.

T. P. CRUTCHER, M. D. Nashville, Tenn.

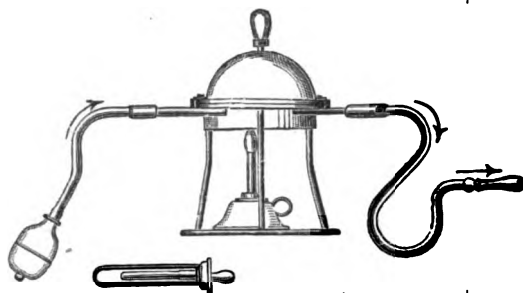
[For the Brief.]

Thanks for Pathology and Treatment.

EDITOR MEDICAL BRIEF:—Allow me the pleasure of thanking Dr. Beers, of Louisiana, and Dr. Stratton, of Illinois, for their kind words of cheer, and prescriptions, in answer to my communication in March BRIEF. I am always grateful for any new ideas on pathology of diseases, as well as the different modes of treatment. I have been searching for more light in medical science for nearly a quarter of a century, and am always willing to impart to the profession any information, especially as regards the diseases of women, of which I claim to be well posted, if by so doing others may be benefited. H. F. ADAMS, M. D. Colton, Cal.

On the Use of the Black Sulphuret of Mercury, etc., Through Fumigator and Vaporizer.

BY G. S. GOODHART, M. D., OF LOUISVILLE, KY.



Pat. Feb. 17, 1885.

The instrument, of which the above is a representation, is not intended to supercede any hitherto approved treatment, but that to the most successful treatment in the diseases herein enumerated, that administered through this apparatus is a most valuable adjuvant, and in otorrhœa and deafness resulting from it, catarrh of the nose, croup, and in utero vaginal diseases, it constitutes the chief treatment and is inferior to no other.

Treatment through it cures otorrhœa consequent upon scarlatina or measles.

It cures deafness consequent upon otorrhœa.

It cures or materially improves nasal catarrh:—A case in which both nostrils had been wholly obstructed for over three years, was greatly relieved and the obstruction removed by two applications, enabling the patient to breathe freely through both nares.

It cures, or is highly serviceable in the treatment of diphtheria, scarlatina, tonsillitis, quinsy, putrid, ulcerated, phagedenic and every variety of sore throat, regardless of its cause.

Its timely application in croup and laryngitis will relieve the sufferer in a few minutes by supplying a vapor which renders cough and respiration

less frequent and liberates the child from all danger.

In diarrhœa, dysentery, colic and cramp, hot steam and fomentations can be conveyed to the abdomen by this apparatus, to the great comfort of the patient.

In the local treatment for amenorrhœa, leucorrhœa, dysmenorrhœa, menorrhagia, abrasions and ulcerations of every grade and character of these parts, and of the uterus, not excepting gonorrhœa, syphilis, nor even

cancer, the purifying, antiseptic, alterative, soothing and reparative (indirectly) properties of the fumes are probably not surpassed by any one local or constitutional remedy hitherto known.

Through the catheter, it is applicable in the treatment of catarrh of the bladder, and through the stomach tube, it may prove a valuable adjuvant in ulceration, etc., of that organ.

It is probably the best medium through which to inhale the fumes of appropriate remedies in the treatment of asthma and whooping cough.

It will destroy parasites at every stage of development whether in germ, embryo or fully matured: Hence itch, tetter, and ring-worm speedily yield to its treatment, and why may not a sufficient amount of the fumes be admitted to the lungs to destroy bacteria?

In the treatment of chronic or indolent ulcers, on any part of the body, frequently baffling the efforts of the most skillful and experienced physician and surgeon; treated through the fumigator, the ulcer will often speedily assume a favorable aspect, by the appearance of healthy granulations and cicatrizations—and hence its utility in ulceration of rectum and hemorrhoids.

The above are some of the diseases to which the fumigator and vaporizer is applicable, but the intelligent and industriously inquiring physician using it will soon discover other fields of usefulness for it, and will increase largely the number of remedies adapted to it, as well as the diseases in which it has not been used. Among the latter are, skin and various chronic diseases, especially rheumatism. To treat these, the fumes can be generated and conveyed to the surface of the body under a lady's gossamer seamed about the neck, with undoubted good results.

Nearly every lotion or gargle administered in solution is available through this instrument, but the most potent agent used so far, is the black sulphuret of mercury recently discarded from the United States and British Pharmacopœas. It consists of equal parts of sulphur and mercury, and is the chief agent used in the treatment of the ear, nose ulcers, menstrual irregularities, and for the destruction of parasites. For this purpose from fifteen to twenty grains of Ethop's mineral are put upon a piece of asbestos, which is placed in the instrument, and after the fumes are started, they are readily conveyed to the parts affected by compressing the rubber bulb, or a mouth piece used in place of the bulb. The fumes of resin are likewise very serviceable in menstrual irregularities. For croup, water alone is used. For asthma and whooping cough, the fumes inhaled from a one-fourth to one-half teaspoonful of the following powder are very highly recommended.

R. Grindelia..... 8 drachms.
Jaborandi. 8 drachms.
Cubebs..... 4 drachms.
Digitalis..... 4 drachms.
Stramonium..... 16 drachms.
Potass. Nit..... 12 drachms.
Cascarilla Bark..... 1 drachm.

M.

[For the Brief.]

Gastric Vertigo.

EDITOR MEDICAL BRIEF:—I would like to get some information as to an article on gastric vertigo, with the following prescription for the relief of that troublesome affection:

R. Argente Oxidi.....½ grain.
Pulv. Capsici.....½ grain.
Ext. Colocyn. Co.....1 grain.
Pulv. Gum Camph.....½ grain.

M. ft. pil. No. 1. Sig.: After each meal.

I saw and read this article and copied the formula, and have been so much pleased with the results in so many cases, that I have called them my oxide silver pills. But the point I want to make is this: I saw the formula, as I said before, in some medical journal, some years ago, and have looked over every one of my journals that I have bound, with a correct index, and can not find the article or the formula. I am very anxious to know who the *author* of the article is—*will you please aid me* in this matter of information, and if you can possibly inform me, if he is living, I will write to him and give him all the credit I can for devising so valuable a combination of remedies for vertigo, indigestion, constipation, etc.

J. G. CUNNINGHAM, M. D.
Kittanning, Pa.

[For the Brief.]

Correction.

EDITOR MEDICAL BRIEF:—In my article on cancer in March BRIEF, page 101, the following errors occur, and subscribers will please note the corrections: "Opposite" for "Apposite;" "Dupuytren" for "Dupuytten;" "Justamond" for "Jartamond;" "Cinnabaris" for "Cinnabasis;" "Levigat" for "Lavivat." By tracing these corrections in the article with your pen you will oblige an admirer of the BRIEF.

Dorset, Va. J. L. DORSET, M. D.

A Remedy for Partial Deafness.

Dr. Tee says, in *Drugman*, a young lady who recently came to dwell in my family stated that, for nearly six years, she had not been able to hear with the left ear when a finger stopped the right ear, unless a person were speaking in a loud tone of voice. I hinted carefully that the accumulation of wax in an ear sometimes will render a person nearly deaf. But that was not the difficulty with her ear, as she stated, in a very decided manner, "as I always," said she, "keep my ears scrupulously clean." I cautiously asked if she would allow me to look into her ear. The reader may imagine her blank amazement when I told her that her left ear was literally plugged up tight with hard wax as black as pine tar! Indeed, the wax had become so hard that it was almost impossible to thrust an ear-spoon into it. For six years past, she had been accustomed to thrust in her little finger to remove the wax, and, by repeated pressure, the end of the finger had forced the wax inward until there was a solid plug of hard wax an inch in depth. The skin all around this hard wax was sore and covered with matter. The interior of the ear was so sensitive that as soon as the little instrument touched the wax the slight pressure of the wax on the ear would produce intense pain. I worked more than an hour by way of trying to remove the wax; but the operation was so painful that I was obliged to desist. She then reclined on the sofa, with the left ear upward, into which were dropped about eight or ten drops of pure sweet oil. She remained in that position for two hours, when the wax had become so soft that it was readily removed. When she retired to bed at night, she said that she filled the ear full of oil, so that it ran out the next morning

when she turned her head over. After the ear was thoroughly cleansed with warm rain-water and a little soap, she could hear quite as distinctly as with the right ear. Two days later, while she was sitting on the opposite side of the table, I whispered as low as I could and hear myself what I said, and she could hear equally well with both ears.

I found by trial that I could not see the wax distinctly until I had adjusted her head so that the sun could shine directly into the ear. One can not see the end of the orifice in an ear unless he will take hold of the head of the person and adjust the ear so that the sun can shine directly to the bottom. The end of even a small finger is usually so large that it will crowd the wax inward so far that the finger nail can not remove it. There is no doubt that partial deafness is frequently caused by forcing the wax inward and eventually plugging the ear so closely that one can not hear ordinary conversation.

Recently, an ear of one of my sons became so inflamed that he could not hear. A physician examined and "doctored" it for several weeks, when he stated frankly that he did not think the difficulty could be removed. Another physician told him that the "cavity was jammed full of wax." A little oil was applied to soften the ear wax, after which it was scooped out with an ear-spoon. Soon after the wax had been removed he could hear as well with that "deaf ear" as with the other, and the hearing, ever since, has been as acute as at any former period of life.

A DEATH is reported in the *Lancet*, resulting from the use of antipyrin. About fifty grains were given within three hours. A fatal collapse followed, death occurring in thirty-two hours.

[For the Brief.]

Review.

EDITOR MEDICAL BRIEF:—I have just had the pleasure of examining Prof. N. S. Davis' lectures on the Practice of Medicine. Its pathology is very superior, and its treatment in advance of any "*regular practice*" I have seen. The more new remedies a work now embraces *the better*. One great mistake that writers now make is, that they try to keep in *old ruts*.

This age demands improvement in everything. Medicine must keep pace with advancing science. Prof. Davis' book ought to be in the hands of every student. It is published by Jansen, McClurg & Co., Chicago.

I. J. M. Goss, A. M., M. D.
Marietta, Ga.

[For the Brief.]

Puerperal Convulsions.

EDITOR MEDICAL BRIEF:—On the night of September 10th, I was called to see Mrs. —, primipara. (I met there, three physicians, Drs. E. H. Bemis, J. R. Scruggs and W. H. A. Bemis, the last of whom, the Memphis Hospital Medical College may well be proud. Her banner will never trail in the dust while she sends forth such sons as standard-bearers. Glorious City of Memphis! May thy Medical College live forever.) When I arrived I found her in a comatose condition; temperature 101°; pulse, 160; respiration, 40. She had been thoroughly impressed with morphia.

I advised Norwood's tincture; beginning with twenty drops, increased till we got to fifty drops, after that, thirty drops every two hours; her pulse then dropped down to 110; temperature, 101°; respiration, 28. Sept. 12th, temperature, 100°; pulse, 120; respiration 24. The Norwood's tincture and morphia was continued till she convalesced.

Case 2. Was called hurriedly to see Mrs. G., messenger stating that the woman was dying. On my arrival I found she had had several convulsions; I gave her one grain of morphia hypodermically. She continued to have convulsions till I gave her the Norwood tincture hypodermically, after which she had no further trouble.

Case 3. Was summoned to meet several physicians in consultation. This case had taken Norwood's tincture; she continued to have convulsions, till the morphia was given. Since I have made use of this treatment, I have had no trouble in controlling these convulsions.

One butterfly does not make a summer, but to save three cases, without losing one (*all bad cases*), is quite an improvement on losing all. Brethren, try this and you will be pleased. Let me hear from you through the dear old BRIEF. T. H. GORDON, M. D.
Oakland, Miss.

SUPPORTING THE PERINEUM.—In the *Clinique de Accouchements* at Paris, Depaul, in one of his last lectures said: "I never support the perineum; I am contented with supporting the head of the foetus, and preventing it from emerging too suddenly." Often, when the perineum has been supported, it has been found on withdrawing the hand that a rent has been made in the perineum by the hand itself. For this reason, Depaul said, support the head, but leave the perineum alone.

DR. BULKLEY says that he never opens a carbuncle, even when it is full of pus, as shown by fluctuation. He leaves it to nature to supply a free outlet. He thinks that an incision leads to absorption of purulent material and blood poisoning.

[For the Brief.]

Fistula in Ano.

EDITOR MEDICAL BRIEF:—I desire to ask, through the medium of your excellent journal, whether some of your thirty thousand subscribers can tell me whether there is not a better remedy for fistula in ano than laying the fistula open? As I have some important cases waiting, please delay no time in answering the question through the BRIEF. E. B. HAMPTON, M. D. Jonesville, N. C.

[For the Brief.]

Foul Breath—Abscess.

EDITOR MEDICAL BRIEF:—I have just had two cases that happily illustrate the varied scope of the antiseptic listerine, of which I have seen much just praise. A patient troubled with constant foul breath, both from indigestion and bad teeth, was placed upon listerine, one teaspoonful night and morning internally, and a solution of half listerine, half water, applied with tooth brush. The indigestion was corrected and breath is sweet.

The second case was an abscess in horse's foot. Incision was made, and after pus was evacuated, filled the cavity with absorbent cotton saturated with listerine. The smell, which was more horrible than any I have ever known, was wholly deodorized, and healed rapidly without other dressing. Mt. Hamill, Ia. C. F. WAHRER, M.D.

PICROTOXIN IN THE NIGHT-SWEATS OF PHTHISIS.—In several cases in which atropine, quinine, and ergot had proved unsuccessful, Dr. Westbrook obtained excellent results with picrotoxin. It was given by hypodermic injection in dose of one-half to one milligramme ($\frac{1}{16}$ to $\frac{1}{8}$ grain), gradually increased to three milligrammes. It was also efficacious when given by the mouth.

INCISION AND DRAINAGE IN HEPATIC ABSCESS.—Dr. Ridley reports the case of a sailor, suffering with abscess of the liver, who came under the care of Mr. Crisp. He had already been aspirated once, and about a pint of pus was drawn off. Mr. Crisp made a free incision, passed a director into the abscess-cavity, the tissues over the most prominent part of the fluctuating mass were freely divided, and more than a pint of chocolate-colored matter was evacuated. A very large drainage tube was then introduced, which penetrated to a depth of about five inches, and a dressing of oakum was applied. The discharge was very profuse at first, and it was necessary to change the dressings twice a day for the first three days; at each dressing the cavity was washed out with a solution of boracic acid. After this the discharge lessened considerably, and the wound was dressed once a day. At the end of a week the patient was allowed to get up; and in four weeks from the date of the operation, the wound had entirely healed, and the patient was discharged cured.—*British Medical Journal*.

DR. WILLIAMS, of Nashville, testified to his success in treating carbuncle without incision. He gave one patient half a gallon of whisky per day. No perceptible effect from the whisky was observed by the patient until the carbuncle became better, when he perceived the influence of the liquor.

DR. HOWARD A. KELLEY, of Philadelphia, advises a four per cent solution of cocaine, as a local application in diphtheria. He has found that it not only relieves pain, but dissolves the false membrane and appeared, in four cases in which he tried it, to have a directly curative effect.—*Med. News*.

Food as an Element of National Strength.

BY PHINEAS WOOD, M. D.

A recent diplomatist, writing to our Secretary of State from Germany, says: "It would be a legitimate field of inquiry to ascertain what are the conditions which enable England to manufacture machinery and other products, at less price than similar goods can be manufactured in France, and at prices equal to those in Germany, while the rate of wages paid to workmen engaged in those manufactories in England are on the whole higher than those paid for similar labor in France, and on the whole, double the wages paid for similar labor in Germany."

The answer is not very difficult. Man is above all an organic being. From childhood to the grave he does battle for his existence. Every breath of air, every motion of the muscles in work, is a waste of tissue.

What is food? It is merely so much matter added to his system as may be necessary to recreate what is constantly subjected to disintegration through his work. It is only the fuel necessary to supply the working power that we see turned into labor and production.

A half-fed or an under-fed body can no more produce full results than an engine not sufficiently supplied with fuel or a horse that is half-starved.

Why, then, can the English laborer on the whole do better work than his brother workman across the channel? Simply because he eats more and better food than the German or the Frenchman. The American laborer eats more and better food than the German, the Englishman, or the Frenchman, and he does more and better work than either.

It is the underfed and half-starved laborer that is cheap all round the world, because it can produce but little in comparison. The Hindu—lean, lank and half-nourished—will work for ten cents a day in the fields of India, but the muscular exertion that he puts forth does not equal half that of an American or English farmer in his field, and consequently the results can be but half as much. The underfed and half-starved German labor is found to produce the saddest results. Scrofula and hunger diseases prevail in some districts to a grave extent. In certain villages, few young men are found strong enough for the army; and for all the harder work of road building, Italian laborers are imported to take their place. The descendants of the conquerors of Rome,—of the giants whose very appearance, centuries ago, made Rome tremble, have become so weakened through hereditary anæmia, caused by poor feeding, that for work requiring muscular exertion, they have recourse to-day to the descendants of their ancient foes who were a mock and a by-word to their forefathers.

German scientists have endeavored to remove the question from the hazy region of guess-work to that of actual fact. It has been proven by them that excessive hours and insufficient nutrition are not merely a hindrance to immediate good results, but that they do an infinite harm of lasting nature, in that they sap the best forces of the body and hurt posterity as well.

Dr. Jaeger says, "So long as there is a sufficient quantity of oxidizable matter in the body, the albumen in the substance does not suffer from exercise, but as soon as the former is consumed, the albumen is attacked by oxygen to the detriment of the living substance whose structure is thereby

impaired. Upon this rests the damaging influence of over-exertion when combined with underfeeding."

Now what lesson do these facts suggest to those who are endeavoring to live in the best way and with most strict obedience to the laws of health? It is very simple: *Do not starve yourself!* Remember that the theoretically perfect diet for a man in health may possibly need some variation, if you have lost greatly in weight and strength. Eat the right articles of food, but of them, *eat enough*. There can be no objection to any person, in good health, trying any experiment in diet he may wish, which looks toward good results; but it is not wise for any one of impaired vitality, of lessened bodily vigor, of steadily decreasing weight, to decrease the quantity of nutriment which the system demands, except it be by advice and under the surveillance of the physician who is guiding him toward health. Every good rule has its exception.—*Laws of Life*.

IODOFORM IN THE TREATMENT OF GOITRE.—Dr. C. E. Bean, in the *N. W. Lancet*, reports five cases of goitre which he treated successfully with iodoform. If this treatment proves equally satisfactory with the physicians generally, it will be a great boon to the profession. Where the patient's health was good only local treatment was used, which consists in applying twice a day with a camel-hair brush, over the whole extent of the swelling, a ten per cent solution of iodoform in collodion. In a few days after the coating begins to detach itself, the skin becomes very tender, when the application will have to be discontinued for a time. After this there is usually no more tenderness.

The treatment was successful in all the cases reported, and lasted from

three weeks (the shortest time) to six months. In four of the cases he gave in connection with the local treatment a pill containing three grains of iodoform and one grain of iron by hydrogen. This, if continued several weeks, frequently produces nausea, which necessitates its discontinuance for a day or two at a time.

These cases occurring in young, adult life, and old age, in anemic patients and those comparatively healthy, would seem to prove the applicability of the treatment to all conditions, and in none of them has been the slightest return of goitre or of tenderness of the parts.

SPECIALISTS.—Men are never fit to become specialists until after having practiced generally for a number of years. The general practitioner should merge into the specialist by a regular cycle of evolution or transformation. The human body is not a machine in the sense of the word that one organ can be removed after another, cleaned, repaired, replaced, and the whole set to work again. No man should undertake to learn and practice the anatomy of one region, without at first becoming acquainted with the whole. The symptoms of disease are so varied, and oftentimes so remote from the original cause, that, were a man to know but a smattering of general physiology and undertake to become a specialist, he would, as many do, find himself oftentimes perfectly at sea, without the slightest idea of his case. How often does the aurist, for example, send his patient to the dentist for the remedy? How often the house physician require the aid of the surgeon? How often, in fact, the specialist, if he is honest and imbued with the proper spirit, needs and applies for aid to the family physician, and *vice versa*.

Cocaine in Rectal Surgery.

The *Lancet* says that cocaine seems destined to play an important part in the treatment of painful affections of the rectum and genito-urinary system. Dr. Bettelheim, of Vienna, reports the case of a man, aged seventy-four, who had well marked anginal attacks, the result of atheroma of the aorta and ossification of the coronary arteries. For some time he had, in addition, complained of rectal and vesical tenesmus. Percussion over the bladder showed that it was not dilated, and rectal examination demonstrated the fact that the prostate was much enlarged and probably the cause of the trouble. Cacao butter suppositories were ordered, each containing half a grain of muriate of cocaine. One of these was introduced into the rectum at bedtime, and the patient slept well, and was not troubled during the night. The beneficial effects were apparent the whole of the following day. The suppository was not given that evening, and the patient passed an uncomfortably, restless night. The next day another suppository was ordered, and acted as well as the first. From the promptness and efficacy of the cocaine in this case, a brilliant future may be anticipated for the alkaloid in this department of surgery. It is now being largely used in many of the London hospitals in the treatment of piles, fissure and fistula.—*Med. and Surg. Reporter*.

THE bicarbonate of soda is recommended by Dr. Rosseau as an external application in eczema. He uses it in the form of a pomade of the strength of fifteen grains of the soda to one and a half drachms of lard or other base. He holds that it alters the morbid anatomical elements of the skin and restores it to the normal state.

FREE TO OUR SUBSCRIBERS.

We will mail, post-paid, one of Barry's splendid Clinical Thermometers to any old subscriber who will send us a new subscriber and two dollars, and date the subscription either from the present time or the first of the year, as we are prepared to furnish the back numbers for 1885. For particulars of thermometer see ad. page 32. This is a rare offer, and we hope our subscribers will avail themselves of it and secure one of these well-known and valuable instruments. We make this offer in order to supply our patrons with an instrument that we can heartily recommend.

Special Notes.

 Bound Volume **MEDICAL BRIEF**, for 1881, will be mailed, postage paid, on receipt of \$1.00.

I am much pleased to state that I am now using **CELERINA** in a hopeless case of cancer (general systemic) with very gratifying effects to the patient. She insists that it has almost obviated the necessity for morphia.

T. N. CLARK, M. D.
Reagan, Falls Co., Tex.

 SEND to RHO CHEMICAL Co., St. Louis, Mo., for samples, and mention the **BRIEF**.

BATTLE & Co.—I take great pleasure in saying, after using **PAPINE** in a test case of hypochondriasis, marked good effects were produced to the great satisfaction of my patient and her attending physician.

W. A. HUNT, A. M., M. D.
Lynnville, Ind.

SEND to Smith & Shaw, 168 W. 34th St., for pamphlet of their new Electric Battery. See ad. page 4.

SEND to Mariani, 19 East Sixteenth Street, New York, for their complete and interesting treatise on "Erythroxyton Coca" and "Vin Mariani," translated from the French, with opinions of eminent French physicians, which will be sent free, if the **MEDICAL BRIEF** is mentioned.

PROLAPSUS UTERI.—I prescribed **ALETRIS CORDIAL** (Rio Chemical Co.) for a patient who had prolapsus uteri, in what Thomas calls the first degree, due to the loss of tone in uterine ligaments and enfeeblement of other uterine supports, the Aletris Cordial, together with hygienic measures, effected a cure.
Unionville, Ind. D. W. BARRON, M. D.

 **TEST IT.**—A full-size bottle of Peacock's **FUCUS MARINA** will be sent **FREE** to any physician who will pay express charges. See ad. page 35.

SCOTT'S Emulsion of Pure Cod Liver Oil with Hypophosphites is largely prescribed by the profession. Send for samples and mention **MEDICAL BRIEF**.

SEND for samples of **Fellow's Hypophosphites** and mention **MEDICAL BRIEF**. See 4th page cover.

 **JOHN WYETH & BRO.'S TABLETS** are put up in bottles of 25 each, which will be sent by mail on receipt of 35 cents.

SEND to Fairchild Bros. & Foster, 84 Fulton Street, N. Y., for samples of their **PANCREATIC TABLETS**, and mention **MEDICAL BRIEF**.

For some time past I have used **CELERINA** in my practice. I used it first in a case of *nervous prostration with success after other remedies failed*. Would recommend it in nervous or brain troubles. I find it soothing and permanent in its effects, and in many cases of nervous debility and loss of *will power in certain directions*, produced by indiscretions, etc., I consider it an invaluable remedy.
L. ANDREWS, M. D.
South Richland, Oswego Co., N. Y.

A. S. ALOE & Co. are offering special inducements to physicians to trade direct with them, and will send circular explaining their plan, on application, if **MEDICAL BRIEF** is mentioned

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I HAVE been prescribing **BROMIDIA** for some time and can give my testimony as to its being the hypnotic par excellence. I advise all physicians to keep a bottle on hand to use in the place of morphia or opium to produce refreshing sleep.
Wallaceville, S. C. J. M. GLENN, M. D.

"**LISTERINE** is certainly a very elegant preparation, and I use it with much satisfaction. I find it peculiarly adapted to those cases where the odor or constitutional effects of carbolic acid are objectionable."

E. FLETCHER INGALS, A. M., M. D.,
Professor of Diseases of the Chest and Physical Diagnosis, Rush Medical College, and Woman's Medical College, Chicago, Ill. etc.

PAMPHLETS on Digestion and Assimilation, Consumption, etc., will be sent free, if **MEDICAL BRIEF** is mentioned, by addressing **W. F. Kidder & Co.**, 83 John Street, N. Y.

I HAVE tested **PAPINE** in several cases. I am satisfied that it has a brilliant future in store for it. I am much pleased with the certainty of its action, the agreeableness of its taste, and the wide range of its indications.

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SCHLEP'S PATENT PLATFORM CART claims to have points over all other vehicles which you can not afford to overlook in making your purchases. No objectionable horse or cart motion, as the device in connection with platform springs is practical, symmetrical, attractive and light, and rides with luxurious ease. Send for descriptive circulars and mention **MEDICAL BRIEF**. See ad., page 25.

I HAVE found **ACID MANNATE** to be a very efficient remedy in cases of constipation, due to torpid conditions of the liver. In the latter months of pregnancy, when a simple, painless laxative is so often indicated, it serves its purpose well, keeping the bowels in a regular and soluble condition.
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SEND to **T. Metcalf & Co.**, 39 Tremont St., Boston, for pamphlet containing full directions for the internal use of **Liquor Pancreaticus**, and the preparing of peptonized foods, and mention **MEDICAL BRIEF**.

SEND \$1.25 to **John Barry**, 62 Fulton St., New York, and he will send one of his reliable thermometers, post-paid.

SEND for catalogue of the *Improved Elastic Truss Co.*, 822 Broadway, New York.

ADDRESS THE SMITH & OWENS PRINTING Co., St. Louis, about "Indiana Statutes, 1885." Enclose postage.

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Yours respectfully,
Bustleton, N. J. G. W. H. CALVER, M. D.

THE New York Pharmacal Association wish to call your attention to their ad. on page 12, in which they claim to have the most important remedial agent ever presented to the profession for Dyspepsia, Vomiting in Pregnancy, Cholera Infantum, Constipation, etc. Send for pamphlet and mention MEDICAL BRIEF.

THE old reliable house of B. Keith & Co., manufacturers of *Concentrated Medicines*, have removed from their old stand, 41 Liberty St., New York, where they had been doing business for the past twenty-five years, to their new quarters at 75 William St., where they should be addressed.

LIQUID FOOD.—The attention of our readers is directed to the advertisement of "Herold's Malt Extract" on ad. page 22. Samples of this Extract or "Liquid Food" will be sent to Physicians, if MEDICAL BRIEF is mentioned.

COMPRESSED TABLETS.—Send to John Wyeth & Bro., Philadelphia, Pa., for samples of their Compressed Tablets, and mention MEDICAL BRIEF. See ad. p. 13.

SEND to Dr. T. B. Wheeler, Montreal, Canada, for samples of "*Tissue Phosphates*" and mention MEDICAL BRIEF.

READ Metcalf's ad. on page 28. Send for sample, and mention BRIEF.

SEE ad. page 6. Send to Seabury & Johnson, 21 Platt St., N. Y., for samples and catalogue, and mention MEDICAL BRIEF.

SEND to Wm. S. Merrell Chem. Co., Cincinnati, Ohio, for a catalogue of their *new and choice* preparations, and mention MEDICAL BRIEF.

WE call especial attention to the Electrical Instruments advertised by the Galvano-Faradic M'fg. Co., of 300 Fourth Ave., New York. Send ten cents for their "*MANUAL OF MEDICAL ELECTRICITY*," and mention the BRIEF.

WRITE to C. N. Crittenton, 115 Fulton St., N. Y., for *sample bottle* of COLDER'S LIQUID BEEF TONIC and mention MEDICAL BRIEF.

YOUR attention is specially called to the ad. of The Duffy Malt Whiskey Co. They will send a quart bottle, as a sample, for seventy-five cents, in a neatly packed wooden case, if MEDICAL BRIEF is mentioned. See ad. page 26.

SAMPLES of Crab Orchard Salts will be sent to Physicians if MEDICAL BRIEF is mentioned. Address Crab Orchard Water Co., 208 W. Main St., Louisville, Ky.

SEE Anglo-Swiss Milk advertisement on advertisement page 2. Send for samples and mention BRIEF.

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SEND to Gaunt & Janvier, 55 Grand St., N. Y., for *samples* of Golden Scale Pepsin. Samples furnished *free* to physicians, if MEDICAL BRIEF is mentioned.

GONORRHEA, GLEET AND LEUCORRHEA.—Having used Kennedy's *Pinus Canadensis* in several obstinate cases of mucous irritation, especially gonorrhea, gleet and leucorrhea, with such satisfactory results, that I can but add my humble recommendation in unison with so many worthy practitioners in endorsing its merits.
Grand Isle, La. J. J. DIET, M. D.

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Special attention is directed to our ad. on advertising page 11. We will send samples sufficient to test it thoroughly in practice, if MEDICAL BRIEF is mentioned. Doliber, Goodale & Co., 41 Central Wharf, Boston, Mass.

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You can obtain pure Hydrochlorate of Cocaine from McKesson & Robbins, 91 Fulton St., New York. They are receiving large orders from Europe for their preparation of Cocaine. See 2d page cover.

SEND to Reed & Carnrick, 182 Fulton Street, N. Y., for samples of BEEF PEPTON-IDS, MALTINE, and PEPTONIZED COD LIVER OIL AND MILK, and mention MEDICAL BRIEF.

EXCURSIONS TO EUROPE.--A number of attractive excursions during the coming Spring and Summer are announced by Messrs. THOMAS COOK & SON, the well-known tourist agents of New York and London, which are arranged on the most popular scale of prices. Full programmes of these trips, with maps showing the routes followed, are to be found in their monthly paper, *Cook's Excursionist*, published at 261 Broadway, N. Y.

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Mr. Mellier, manufacturer of ~~Stouffer's~~ *Stouffer's*, writes: "Dr. Dumars, of Peoria, reports the case of a man about forty-five years of age, the janitor of the building in which his office is located, had been a sufferer from rheumatism for nearly ten years. The attacks were very severe and very frequent, often necessitating the use of crutches, and would not yield to treatment with any degree of certainty. During paroxysms, relief from pain was secured only by the use of morphine.

"Having received a sample bottle of ~~Stouffer's~~ he gave it to his patient, who derived so much benefit from the use of its contents that he took the remedy regularly. Having used three bottles within four weeks, he found himself entirely free from the complaint and has experienced no recurrence since, although eighteen months have passed, and he has been able to attend to all of his duties during two very severe winters."

WRITE to the Nelson Pharmacal Works, 18 and 20 Platt street New York, and get a sample of Gastropeptic, their new preparation. Always mention MEDICAL BRIEF.

A MALARIAL ANTIDOTE.—I have prescribed *Fucus Marina* (Peacock), and find that it will do all that is claimed for it. As a Malarial Antidote, (and to prevent the return of ague after it has been checked with quinine), *it surpasses any agent I have ever employed.* I shall continue to prescribe it whenever it is indicated.

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I. N. GRAVES, M. D.

To those who have, for any reason, never yet tried the preparations of Scott's Emulsion and Buckthorn Cordial, manufactured by Scott & Bowne, Chemists, 108 and 110 Wooster St., New York, they will be pleased to send samples free by express, if **MEDICAL BRIEF** is mentioned.

SEND to Thos. Leeming & Co., 18 College Place, New York, for their valuable pamphlet on Nestlé's Milk Food, and mention **MEDICAL BRIEF**.

It is an established fact that the most *natural*, the most perfect, substitute for mother's milk, is *milk again*, particularly cow's milk *properly diluted* and sweetened with sugar of milk. Cow's milk in its ordinary state, however, is not properly reliable and digestible for either infants or invalids. But by the new process employed in the preparation of *Dyer's Special Cream Brand*, the milk is converted into the most digestible and nourishing of foods. In fact, in digestion it undergoes precisely the same changes as mother's milk; does not curd like fresh cow's milk and can not cause flatulency. This preparation keeps for years in any climate yet contains no cane sugar or other addition.

TRIED WITH SUCCESS IN EIGHT CASES.—*Fucus Marina* (Peacock) seems to possess all the remedial properties that are claimed for it. I have given it a trial in eight cases of Malarial Fever—two of which were chronic cases, the patients having been afflicted with intermittent fever for more than six months. So far no relapse has occurred in any of these cases.

A. A. HENSKE, M. D.,

Physician to St. Anne's Hospital.
1504 St. Louis Ave., St. Louis.

SEND to the Griswold Corset Parlors, 126 State St., Chicago, for circular and prices of Madame Griswold's Patent Shoulder-Brace and Abdominal Supporting Corsets, and mention the **MEDICAL BRIEF**.

Book Notices.

MICRO-CHEMISTRY OF POISONS, including their Physiological, Pathological and Legal Relations; with an Appendix on the Detection and Microscopic Discrimination of Blood. By Theodore G. Wormley, M. D., Ph. D., LL. D., Professor of Chemistry and Toxicology, in the Medical Department of the University of Pennsylvania. 2nd Ed. 1885. Philadelphia: J. B. Lippincott Co.

This very valuable contribution is specially adapted to the use of the medical jurist, physician and general chemist, and contains ninety-six illustrations upon steel. This, the second edition, has been thoroughly revised and enlarged by the addition of new matter and illustrations, having an entirely new chapter on Gelsemium Poisoning and an appendix on the Nature, Detection, and Microscopic Discrimination of Blood, and among the new subjects added we find poisoning by Potassium Chlorate; Post-Mortem Diffusion of Arsenic in Medicine, in Fabrics and in Glass; Dragendorff's Method of the Recovery of Vegetable Principles; Nature of Ptomaines; and the preparation, properties, and recovery of Jervine. In fact, the extent, variety and precision of the information furnished, embracing the whole range of human knowledge, and bringing discoveries and research down to the latest, is indeed surprising. To the practicing physician it will be found to be indispensable, while to the professional chemist it will prove of great value as a book of reference and convenient authority. The price of this work is \$7.50, and contains nearly 750 pages independent of the illustrations.

THE DIAPHRAGM AND ITS FUNCTIONS: Considered Specially in its Relation to Respiration and the Production of Voice. By J. M. W. Kitchen, M. D. "The Voice" First Prize Essay. Edgar S. Werner, Publisher, Albany, N. Y. Flexible cloth, \$1 net, postpaid.

To this treatise was awarded the first prize offered by *The Voice*, competition being open to all writers, foreign as well as American. Without doubt, it is the best work on this organ, in any language. The anatomical division of the subject treats of the diaphragm's location, general shape, gross composite parts, origin, openings, tendon and muscular fibres, minute anat-

omy, blood-supply, lymphatic and nervous supply, relations, embryology and history of development, comparative anatomy and important co-operative structures. The physiological part discusses the function of respiration generally, the movements and varieties of respiration, the action of the respiratory muscles, respiratory action and change of shape and respiratory rhythm of the diaphragm, control of the diaphragm's action, incidental functions of the diaphragm, change of shape in the trunk during respiration, differences in male and female breathing, certain natural phenomena that occur synchronously with the action of the diaphragm, relation of the circulation of the blood to the action of the diaphragm, actions of the diaphragm resulting from extraordinary causes, the comparative physiology of the diaphragm, and functional development of the organ. Under the hygienic heading is considered the diseased conditions to which the diaphragm is subject, the conditions essential to its nurture and healthy action, corset and waist-constriction, special exercise of the diaphragm, how to breathe, etc. An appendix written a year subsequent to the essay itself, gives practical conclusions and advice. The book is valuable both for the medical and the vocal professions.

BERLIN AS A MEDICAL CENTRE. By Horatio R. Bigelow, M. D., Washington, D. C. Sandy Hook, Conn.: New England Publishing Co., 1885. Price \$2.00.

This book is a complete and accurate Medical Guide to Berlin, giving instructions in reference to board, clinics, lectures, expenses, etc., and all information that is necessary for the medical student abroad.

ARCHITECTURE SIMPLIFIED; or, How to Build a House. Containing plans and specimens for twenty-five houses of all sizes, from two rooms up. Chicago, Ill.: Geo. W. Ogilvie, 236 Lake St.

The publishers have sent us a copy of the above entitled work, which contains plans and specifications of houses with engravings showing the appearance of the houses as built from the plans. It not only gives the quantity of material required, but also gives valuable information on subjects relative to building and building contracts, and can not fail to be of interest and value to those who intend to build.

DOES TOBACCO PRODUCE AMBLYOPIA? By W. Franklin Coleman, M. D., M. R. C. S., Eng., Baltimore, Md., Professor of Diseases of the Eye and Ear, Baltimore Polyclinic and Post-Graduate Medical School; Formerly Surgeon to the Toronto (Canada) Eye and Ear Infirmary, and Ophthalmic and Aural Surgeon to the St. John (N. B.) Gen. Pub. Hospital. Reprint from the *Maryland Med. Jour.*

THE OLEATES. Further Investigation into their Nature and Action. By John V. Shoemaker, A. M., M. D., Lecturer on Dermatology at the Jefferson Medical College, etc., Philadelphia: F. A. Davis, Att'y, 1885.

CATALEPSY IN A CHILD THREE YEARS OLD. By A. Jacobi, M. D., Clinical Professor of Diseases of Children in the College of Physicians and Surgeons, New York. Reprint from the *Amer. Jour. Med. Sciences.*

DISINFECTION AND DISINFECTANTS. Preliminary Report made by the Committee on Disinfectants of the American Public Health Association.

ON OXYGEN AS A REMEDIAL AGENT. By Samuel S. Wallian, A. M., M. D., Member of the Essex and Franklin County Medical Societies; Member of the Medical Association of Northern New York; Corresponding Member of the State Historical Society of Wisconsin; Delegate to the American Medical Association, etc. Reprint from the *Med. Record.* New York: Trow's Printing Co.

MEDICAL AND SURGICAL DIRECTORY OF THE UNITED STATES. Detroit, Mich. R. L. Polk & Co., Publishers.

The above firm have now in course of preparation a Directory of Physicians and Surgeons of the United States, which they claim shall be so full and complete as to gain the confidence of the medical profession, and become a permanent standard publication. We will be pleased, after a perusal of its contents, to give a more extended notice, as a work of this nature, that is reliable and accurate, will become indispensable as a book of reference.

THE PHYSIOLOGICAL EFFECTS AND THERAPEUTICAL USES OF HYDRASTIS. By Robert Bartholow, A. M., M. D., LL. D., Professor of Materia Medica and General Therapeutics in the Jefferson Medical College of Philadelphia, etc. Reprint from the "Drugs and Medicine of North America."

VITAL STATISTICS IN TENNESSEE. A report by J. D. Plunket, M. D., of Nashville, Tenn. Member of the State Board of Health and its Committee on Vital Statistics. Reprint from Report of State Board of Health.

MODERN THERAPEUTICS OF THE DISEASES OF CHILDREN, with Observations on the Hygiene of Infancy. By Joseph F. Edwards, M. D., Editor of the *Annals of Hygiene*; Associate Editor of the *Medical and Surgical Reporter*; Author of *Bright's Disease and Its Treatment*; Fellow of the College of Physicians and Surgeons of Philadelphia, etc. Philadelphia: D. G. Brinton, 1885.

We have carefully examined the volume before us, on the Diseases of Children, and take the greatest pleasure in recommending it to our medical friends. Although we have neither time nor space in this notice, to present an elaborate analysis of its contents, nor give any details in regard to the list of eminent specialists whose contributions on this subject appear in this work, let it suffice that they are among the most eminent in the profession both Foreign and American.

CREMATION. Scientifically and Religiously Considered. By Henry Houston Bonnell Philadelphia: Press of D. C. Chalfant. 1885.

SCHOOL HYGIENE IN TENNESSEE. Reprint from the Committee's Report of the State Board of Health, 1885. By Daniel F. Wright, M. D., Clarksville, Tenn. Member of the State Board of Health and Chairman of its Committee on the subject.

PERILS OF AMERICAN WOMEN: or, A Doctor's Talk with Maiden, Wife and Mother. By G. L. Austin, M. D. 250 pp. Ill. Full Gilt. \$2.00. Boston: Lee and Shepard.

The professed object of this work, designed especially for women, is to make plain those laws of their being, which will enable them to ward off disease and those failings which nearly all our American women suffer physically. It teaches them to shun the fearful consequences of indiscretion, and how to be healthier but better in every sense. The application of medical terms would only lead to confusion and confound those who read them, so the author has written this work in a language that can be fully understood, and, by reference to the illustrations, made as plain as it could possibly be. The prescriptions are written in plain English. The work is heartily endorsed by Mrs. Mary A. Livermore, and contains her autograph letter.

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St. Louis, July 20, 1883.

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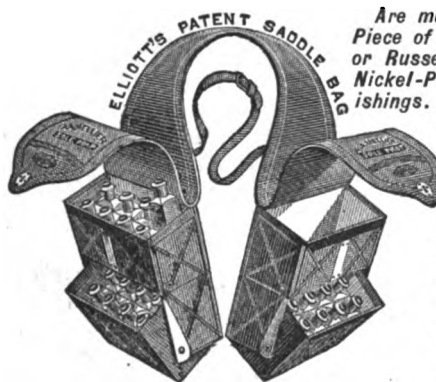
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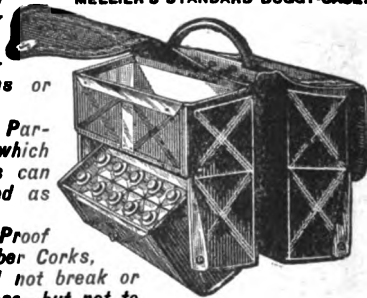


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Fluid Extract Smilax Sarsaparilla, Fluid Extract Stillingia Sylvatica, Fluid Extract Lappa Minor. Fluid Extract Phytolacca Decandra, aa, two ounces, Tincture Xanthoxylum Carolinianum, one ounce. Mix.—Take a teaspoonful in water three times a day before meals, and gradually increase to tablespoonful doses.

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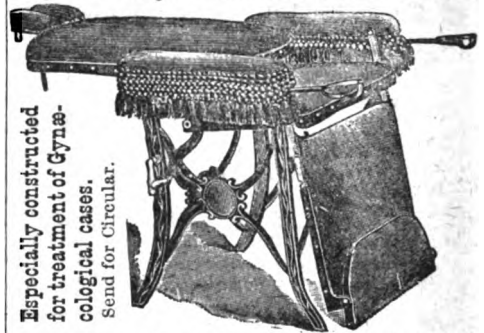
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DOSE.—One or two teaspoonfuls three or more times a day, as directed by the Physician.

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PREPARED FROM THE ALETIS FABINOSA OR TRUE UNICORN AND AROMATICS.

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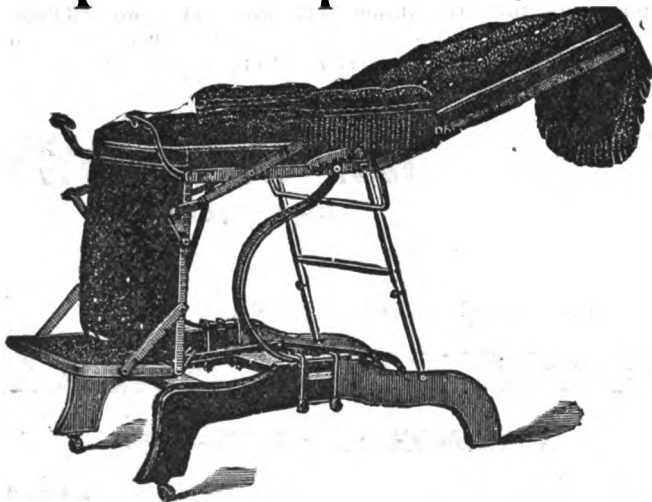
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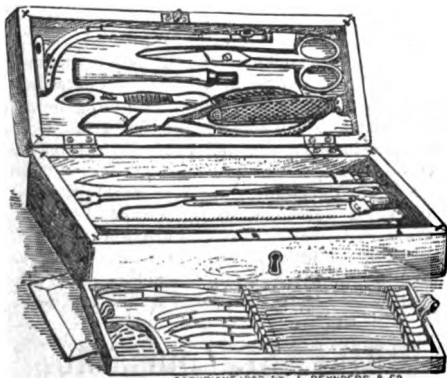
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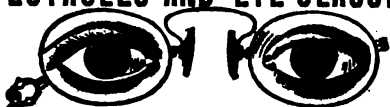
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